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Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	<u></u>
Case number (if known)	Chapter you are filing under:
	Chapter 7
	Chapter 11 Chapter 12
	Chapter 13

#### Official Form 101

#### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Sherrill	
First name	First name
R	
Middle name	Middle name
Pettiford	
Last name	Last name
Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
First name	First name
AA' L II	Terra
Middle name	Middle name
Last name	Last name
First name	First name
Middle name	Middle name
Last name	Last name
XXX - XX- 5121	xxx - xx-
OR	OR
9 xx - xx-	9 xx - xx-
	About Debtor 1:  Sherrill First name R Middle name Pettiford Last name Suffix (Sr., Jr., II, III)  First name Middle name Last name  Middle name Last name  XXX - XX- OR

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Debtor 1 Sherrill First Name	R Middle Name	Pettiford Last Name	Case number (if known)
	About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer	I have not used any busine	ss names or EINs.	I have not used any business names or EINs.
Identification Numbers (EIN) you have used in the	Business name		Business name
last 8 years	Business name		Business name
Include trade names and doing business as names	EIN		EIN
	EIN		EIN
5. Where you live	2605 S Indiana Ave		If Debtor 2 lives at a different address:
	Number Street		Number Street
	Chicago Illinois City State	60616 Zip Code	City State Zip Code
	Cook County		County
	If your mailing address is diff fill it in here. Note that the court this mailing address. P.O. Box A-3211		If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street		Number Street
	Chicago Illinois		
	City State	Zip Code	City State Zip Code
6. Why you are choosing this district to file for bankruptcy	lived in this district longer t	ore filing this petition, I have han in any other district.  lain. (See 28 U.S.C. §§ 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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Debtor 1 Sherrill		K Middle Ness		Last Name	Case number (if know	vn)		
Part 2: Tell the C	ourt Abo	Middle Name out Your Bankru		Last Name				
7. The chapter o Bankruptcy C you are choos file under	f the ode	Check one. (For a b	orief description of	each, see <i>Notice Required</i> and check the appropriate bo		(b) for Individuals Filing for Bankruptcy (Form		
8. How you will the fee	pay	<ul> <li>✓ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.</li> <li>☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A).</li> <li>☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.</li> </ul>						
9. Have you filed bankruptcy w the last 8 year	ithin	✓ No.  ✓ Yes. District  District  District		When When	MM / DD / YYYY  MM / DD / YYYY	Case number  Case number  Case number		
10. Are any bankr cases pendin being filed by spouse who i filing this cas you, or by a business part by an affiliate	g or v a s not e with	✓ No.  Yes. Debtor  District  Debtor  District		When	MM / DD / YYYY	Relationship to you  Case number, if known  Relationship to you  Case number, if known		
11. Do you rent y residence?	our	✓ No.	landlord obtained Go to line 12.	an eviction judgment against entement About an Eviction Judge etition.				

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Debtor 1 Sherrill		R	alla Nama	Pettiford	Case number	(if known)		
	v Bu				<b>.</b>			
Part 3: Report About Ar  12. Are you a sole proprietor of any full- or part-time business?  A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation,	y Bus	Midden Midden Midden Mo.	dle Name  es You Own as a  Go to Part 4.  Name and location of  Name of business, if a	Last Name  Sole Propried  business		(II KROWII)		
partnership, or LLC.  If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.			Single Asset R Stockbroker (a	rusiness (as define Real Estate (as de as defined in 11 U. oker (as defined in	ed in 11 U.S.C. § 101(27A efined in 11 U.S.C. § 101(5		ode	
13. Are you filing under  Chapter 11 of the  Bankruptcy Code and are you a small business debtor?  If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance so operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, the court must know whether you are a small business debtor so that it deadlines. If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it deadlines. If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it deadlines. If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it deadlines. If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it deadlines. If you are filing under Chapter 11, the court must know whether you are a small business debtor, you must attach your most recent balance so operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, the court must know whether you are a small business debtor, you must attach your most recent balance so operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, the court must know whether you are a small business debtor.					palance sheet, statement o	of		
For a definition of small business debtor, see 11 U.S.C. § 101(51D).		No. No. Yes.	Bankruptcy Code.	oter 11, but I am N	NOT a small business deb			Code.
Part 4: Report if You Ov	vn or	Have A	Any Hazardous Pı	roperty or An	y Property That Ne	eds Immedia	ate Attention	
14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or			What is the hazard?  If immediate attention is	s needed, why is it	needed?			
safety? Or do you own any property that needs immediate attention?			Where is the property?	Number	Street			
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?				City	Sta	ate	Zip Code	

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Debtor 1 Sherrill R Pettiford Case number (if known)

#### First Name Middle Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment one of the following plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried internet, even after I reasonably tried to do so. to do so. Active duty. Active duty. I am currently on active military duty in I am currently on active military duty in a military combat zone. a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of about credit counseling, you must file a motion for waiver of credit counseling with the court. credit counseling with the court.

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Debtor 1 Sherrill	R Middle Name	Pettiford Last Name	Case number (if known)				
First Name  Part 6: Answer These Ou	uestions for Reporting Purpo						
16. What kind of debts do you have?	<ul> <li>16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  No. Go to line 16b.  Yes. Go to line 17.</li> <li>16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.  No. Go to line 16c.  Yes. Go to line 17.</li> <li>16c. State the type of debts you owe that are not consumer debts or business debts.</li> </ul>						
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	paid that funds will be available to distribute to unsecured creditors?  ☐ No. ☑ Yes.						
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,00		☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000			
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million			\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million			\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
Part 7: Sign Below  For you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.  If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.  If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  **  /s/ Sherrill Pettiford Signature of Debtor 1  Executed on						

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Debtor 1 Sherrill	R	Pettiford	Case number	(if known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one  If you are not represented by an attorney, you do not	eligibility to proceed up the relief available und to the debtor(s) the no certify that I have no k petition is incorrect.	nder Chapter 7, 11, 1 der each chapter for tice required by 11 U	2, or 13 of title 11, U which the person is S.C. § 342(b) and, i	that I have informed the debtor(s) about Inited States Code, and have explained eligible. I also certify that I have delivered in a case in which § 707(b)(4)(D) applies, nation in the schedules filed with the
need to file this page.	/s/ Elizabeth Place		Date	10/6/2016
nood to mo mo pager	Signature of Attorney		Date	MM / DD / YYYY
	Elizabeth Placek Printed name  Semrad Law Firm Firm name  20 S. Clark Street Street  28th Floor			
	Chicago		Illinois	60603
	City		State	Zip Code
	Contact phone	3124477838	Email address	eplacek@semradlaw.com
			Illin	ois
	Bar number		Stat	re

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Fill in this information to identify your case:							
Debtor 1	Sherrill First Name	R Middle Name	Pettiford Last Name				
Debtor 2 (Spouse, if filin	g) First Name	Middle Name	Last Name				
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)				
Case number ((If known)							

Check if this is an
amended filing

12/15

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	<b>Your assets</b> Value of what you own
Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$138,083.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$3,930.00
1c. Copy line 63, Total of all property on Schedule A/B	\$142,013.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
<ol> <li>Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)</li> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D</li> </ol>	\$148,036.66
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$7,451.00
Your total liabilities	\$155,487.66
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I	\$1,328.38
Schedule J: Your Expenses (Official Form 106J)  Copy your monthly expenses from line 22, Column A, of Schedule J	\$2,272.00

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Del	otor 1	Sherrill	R	Pettiford	Case n	umber (if known)						
			Middle Name	Last Name								
Par	t 4:	Answer These Questions	for Administrative	and Statistical F	Records							
6. <b>A</b>	re yo	ou filing for bankruptcy under Cl	hapters 7, 11, or 13?									
	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.											
	✓ Yes.											
7. <b>V</b>	Vhat I	kind of debt do you have?										
		our debts are primarily consum amily, or household purpose. 11 U.S			, ,	, ,						
		our debts are not primarily consists form to the court with your other		nothing to report on th	is part of the form	a. Check this box and subm	iit					
8.		n the <i>Statement of Your Curren</i> 122A-1 Line 11; <b>OR</b> , Form 122B L	•	, ,	onthly income fro	m Official	\$1,807.12					
9.	Сор	by the following special categor	ies of claims from Part	4, line 6 of Schedule	e E/F:							
	Froi	m Part 4 on Schedule E/F, copy	the following:			Total claim						
	9a. I	Domestic support obligations (Cop	by line 6a.)			\$0.00						
	9b. <sup>-</sup>	Taxes and certain other debts you o	owe the government. (Co	by line 6b.)		\$0.00						
	9c. (	Claims for death or personal injury	while you were intoxicate	ed. (Copy line 6c.)		\$0.00						
	9d. S	Student loans. (Copy line 6f.)				\$0.00						
		9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)				\$0.00						
	9f. C	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)				\$0.00						
	9g. <sup>.</sup>	g. <b>Total.</b> Add lines 9a through 9f.				\$0.00						

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Fill in this	information t	o identify your ca	se:					
Debtor 1	Sher	rill	R		Pettiford			
	First	Name	Middle I	Name	Last Name			
Debtor 2								
(Spouse,	if filing) First	Name	Middle I	Name	Last Name			
United St	tates Bankrup	tcy Court for the:	Northern		District of Illinois			
Case nur	mher				(State)			
(If known)					-			
O.(; ;	. –	400 A /D					Check if this is an	
Officia	ai Form	106A/B					amended filing	
Sche	dule A	/B: Prop	erty				12/	
responsik write your Part 1:	ole for suppl name and o Describe	ying correct info ase number (if k Each Reside	ormation. If more s known). Answer ev nce, Building,	space i /ery qu Land	rate as possible. If two married people is needed, attach a separate sheet to the estion.  , or Other Real Estate You Own esidence, building, land, or similar prop	is form. On the top of any a or Have an Interest In	dditional pages,	
	No. Go to F	Part 2	•	•		•		
<b>✓</b>	Yes. Where is the property?							
					t is the property? Check all that apply.		laims or exemptions. Put	
1.1	Street addr	ess. if available. c	or other description		ingle-family home	the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Prop		
	215 W 16th	PI			Ouplex or multi-unit building	Current value of the	Current value of the	
	Number	Street			Condominium or cooperative Manufactured or mobile home	entire property?	portion you own?	
	Chicago	Illinois	60411		and	\$68083.00	\$68083.00	
	Heights			Hır	nvestment property	Describe the nature of		
	City	State	Zip Code	□	îmeshare	interest (such as fee s the entireties, or a life		
	Cook County				Other	Fee Simple		
	County			Who	has an interest in the property? Check	•	mmunity property	
				<b>✓</b> [	Pebtor 1 only	<b>.</b> ,		
					Debtor 2 only			
					Debtor 1 and Debtor 2 only			
				A	t least one of the debtors and another			
					r information you wish to add about thi erty identification number <u>:</u>	s item, such as local		
If you	own or have	more than one, list	t here:					
1.2					t is the property? Check all that apply.		elaims or exemptions. Put ed claims on Schedule D:	
1.2			or other description		ingle-family home Ouplex or multi-unit building		aims Secured by Property.	
	2605 S India Number	ana Ave Street			Condominium or cooperative	Current value of the	Current value of the	
					Nanufactured or mobile home	entire property? \$70000.00	portion you own? \$70000.00	
	Chicago	Illinois	60690		and	φι σσσσ.σσ	φι σοσοίοσ	
	City	State	Zip Code	☐ Ir	nvestment property	Describe the nature of		
	Cook			□	ïmeshare	interest (such as fee s the entireties, or a life		
	County				Other	Fee Simple	•	
				one.	has an interest in the property? Check	<del></del>	mmunity property	
					Debtor 1 only			
					Pebtor 2 only			

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

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Debtor 1	Sherrill First Name	R Middle Name	Pettiford Last Name	Case number	(if known)	
	et address, if available, or other		Inat is the property? Check all that app Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	ly.	the amount of any sec	d claims or exemptions. Put cured claims on Schedule D: Claims Secured by Property.  e Current value of the portion you own?
Nun City		ip Code	Investment property Timeshare Other		•	e of your ownership e simple, tenancy by ife estate), if known.
			The has an interest in the property? Concept Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another ther information you wish to add abo		(see instruction	community property ns)
		n you own for all	roperty identification number:			138083.00
<b>Do you ov</b> you own th	at someone else drives. If you lea ns, trucks, tractors, sport utility v	ase a vehicle, also	any vehicles, whether they are regist o report it on Schedule G: Executory Cont cles			
_	Make Model: Year:		Who has an interest in the propert one.  Debtor 1 only	y? Check	the amount of any see	ed claims or exemptions. Put cured claims on Schedule D: Claims Secured by Property.
	Approximate mileage:  Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and Check if this is community propinstructions)		Current value of the entire property?	e Current value of the portion you own?
3.2	Make Model: Year: Approximate mileage:		Who has an interest in the propert one.  Debtor 1 only Debtor 2 only	<b>y?</b> Check	the amount of any sec Creditors Who Have Current value of th	
	Other information:		Debtor 1 and Debtor 2 only  At least one of the debtors and and  Check if this is community propinstructions)		entire property?	portion you own? 

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Debtor 1	Sherrill First Name	R Middle Name	Pettiford C Last Name	Case number	(if known)	
2.2		iviluule Name		2 Charle	Do not doduct assured a	laima ar avamations. Dut
3.3	Make Model:		Who has an interest in the property one.	? Check	Do not deduct secured of	ed claims on <i>Schedule D:</i>
	Year:		Debtor 1 only		•	aims Secured by Property.
	Approximate mileage:		Debtor 2 only			, , ,
	Other information:		Debtor 1 and Debtor 2 only		Current value of the entire property?	Current value of the portion you own?
			At least one of the debtors and anoth	her		
			Check if this is community prope			
			instructions)	erty (See		
3.4	Make		Who has an interest in the property	? Check	Do not deduct secured c	
	Model:		one.			ed claims on Schedule D:
	Year:		Debtor 1 only		Creditors Who Have Cla	nims Secured by Property
	Approximate mileage:		Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 only		entire property?	portion you own?
			At least one of the debtors and anoth	her		
			Check if this is community proper	erty (see		
	mples: Boats, trailers, motors		instructions)  Fr recreational vehicles, other vehicles, , fishing vessels, snowmobiles, motorcycle			
Exa	mples: Boats, trailers, motor No Yes		er recreational vehicles, other vehicles, , fishing vessels, snowmobiles, motorcycle	e accessorie	s	laims or examptions. But
Exa	mples: Boats, trailers, motor No Yes Make		r recreational vehicles, other vehicles, fishing vessels, snowmobiles, motorcycle  Who has an interest in the property	e accessorie	S  Do not deduct secured c	•
Exa	mples: Boats, trailers, motor No Yes		er recreational vehicles, other vehicles, , fishing vessels, snowmobiles, motorcycle	e accessorie	Do not deduct secured control the amount of any secure	laims or exemptions. Put ed claims on Schedule D: nims Secured by Property.
Exa	mples: Boats, trailers, motor: No Yes Make Model:		wr recreational vehicles, other vehicles, fishing vessels, snowmobiles, motorcycle who has an interest in the property one.	e accessorie	Do not deduct secured of the amount of any secure Creditors Who Have Cla	ed claims on Schedule D: nims Secured by Property.
Exa	mples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:		who has an interest in the property one.  Debtor 1 only Debtor 2 only	e accessorie	Do not deduct secured control the amount of any secure	ed claims on <i>Schedule D:</i>
Exa	mples: Boats, trailers, motor: No Yes  Make Model: Year:		who has an interest in the property one.  Debtor 1 only	e accessorie	Do not deduct secured of the amount of any secure Creditors Who Have Cla	ed claims on Schedule D: nims Secured by Property. Current value of the
Exa	mples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:		who has an interest in the property one.  Debtor 1 only Debtor 2 only At least one of the debtors and anoth	e accessorie  Check	Do not deduct secured of the amount of any secure Creditors Who Have Cla	ed claims on Schedule D: nims Secured by Property. Current value of the
Exa	mples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:		who has an interest in the property one.  Debtor 1 only Debtor 1 and Debtor 2 only	e accessorie  Check	Do not deduct secured of the amount of any secure Creditors Who Have Cla	ed claims on Schedule D: nims Secured by Property. Current value of the
Exa ✓ 4.1	mples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:		who has an interest in the property one.  Debtor 1 only Debtor 2 only At least one of the debtors and anoth Check if this is community proper	e accessorie ? Check her erty (see	Do not deduct secured of the amount of any secure Creditors Who Have Cla	ed claims on Schedule D: nims Secured by Property. Current value of the portion you own?
Exa ✓ 4.1	mples: Boats, trailers, motors  No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model:		who has an interest in the property one.  Debtor 1 only Debtor 2 only At least one of the debtors and anoth instructions)  Who has an interest in the property one.	e accessorie ? Check her erty (see	Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property?  Do not deduct secured of the amount of any secure	ed claims on Schedule D: nims Secured by Property.  Current value of the portion you own?  daims or exemptions. Put ed claims on Schedule D:
Exa ✓ 4.1	mples: Boats, trailers, motors  No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year:		who has an interest in the property one.  Debtor 1 only Debtor 2 only At least one of the debtors and anoth instructions)  Who has an interest in the property one.	e accessorie ? Check her erty (see	Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property?  Do not deduct secured of the amount of any secures	ed claims on Schedule D: nims Secured by Property.  Current value of the portion you own?  daims or exemptions. Put
Exa ✓ 4.1	mples: Boats, trailers, motors  No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model:		who has an interest in the property one.  Debtor 1 only Debtor 2 only At least one of the debtors and anoth instructions)  Who has an interest in the property one.	e accessorie ? Check her erty (see	Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property?  Do not deduct secured of the amount of any secures	ed claims on Schedule D: nims Secured by Property.  Current value of the portion you own?  daims or exemptions. Put ed claims on Schedule D:
Exa ✓ 4.1	mples: Boats, trailers, motors  No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year:		who has an interest in the property one.  Debtor 1 only Debtor 2 only At least one of the debtors and anoth Check if this is community proper instructions)  Who has an interest in the property one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Mho has an interest in the property one. Debtor 1 only	e accessorie ? Check her erty (see	Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property?  Do not deduct secured of the amount of any secure Creditors Who Have Classifications	ed claims on Schedule D: aims Secured by Property.  Current value of the portion you own?  Laims or exemptions. Put ad claims on Schedule D: aims Secured by Property.
Exa ✓ 4.1	mples: Boats, trailers, motors  No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year: Approximate mileage:		who has an interest in the property one.  Debtor 1 and Debtor 2 only  At least one of the debtors and anott instructions)  Who has an interest in the property one.  Debtor 1 and Debtor 2 only  At least one of the debtors and anott instructions)  Who has an interest in the property one.  Debtor 1 only  Debtor 2 only	e accessorie  Check  Check  Check  Check	Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property?  Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the	ed claims on Schedule D: aims Secured by Property.  Current value of the portion you own?  claims or exemptions. Put ed claims on Schedule D: aims Secured by Property.  Current value of the

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Pettiford Debtor 1 Sherrill Case number (if known) First Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used Furniture \$300.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... (1)TV (1)Cellphone \$300.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles **√** No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments **√** No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment **√** No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ✓ Yes. Describe... **Used Clothes** \$500.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver **✓** No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses **✓** No Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **√** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1100.00 for Part 3. Write that number here

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Deb	tor 1	Sherrill First Name	R Middle Name	Pettiford Last Name	Case number (if known)	
Part	۸٠	Describe Your F		Last Name		
			ny legal or equitable int	erest in any of the fo	ollowing?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
	Dep Exa	ples: Money you have No Yes  posits of money mples: Checking, sav and other similar inst	in your wallet, in your home, in a solution of the results of the results itutions. If you have multiple accounts the results of the results	certificates of deposit; sha	Cash:res in credit unions, brokerage houses,	
	V	Yes	17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account:	Chase Bank		\$1.00
18.			17.8. Other financial account: 17.9. Other financial account: or publicly traded stocks vestment accounts with brokerage Institution or issuer name:	e firms, money market accor	unts	
19.	an I	n-publicly traded sto LC, partnership, a No Yes. Give specific information about them		ted and unincorporated	% of ownership:	

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Deb	tor 1	Sherrill	R	Pettiford	Case number (if known)	
		First Name	Middle Name	Last Name		
20.	Neg Nor	gotiable instruments ir	orate bonds and other negotianclude personal checks, cashiers nts are those you cannot transfer	checks, promissory notes	, and money orders.	
		Yes. Give specific information about them	Issuer name:			
21.	Exa	tirement or pension amples: Interests in IR		), thrift savings accounts, o	or other pension or profit-sharing plans	
	$\mathbf{\Lambda}$	No	Type of coccupt:	Institution name:		
	Ш	Yes. List each account	Type of account: 401(k) or similar plan:	Institution name:		
		separately.	Pension plan:			
			IRA:			
			Retirement account:			
			Keogh:			
			Additional account:			
			Additional account:			
22.	You	curity deposits and p ir share of all unused of imples: Agreements v inpanies, or others No	orepayments deposits you have made so that yo with landlords, prepaid rent, publi	ou may continue service or o c utilities (electric, gas, wat Institution name:	use from a company er), telecommunications	
		Yes	Electric:			
			Gas:			
			Heating oil:			
			Security deposit on rental unit:			
			Prepaid rent:			
			Telephone:			
			Water:			
			Rented furniture:			
			Other:			
23.	Anı	nuities (A contract for	a periodic payment of money to	you, either for life or for a nu	umber of years)	
		No Yes	Issuer name and description:			
					_	_

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Debt	for 1 Sherrill First Name	R Middle Name	Pettiford Last Name	Case number (if known)	
24.		IRA, in an accoun	t in a qualified ABLE program, or unde	er a qualified state tuition program	
	<b>√</b> No		Separately file the records of any interests	.11 U.S.C. § 521(c):	
25.			erty (other than anything listed in line	1), and rights or powers	
	exercisable for your benef	IL.			_
	Yes. Describe				
26.			ets, and other intellectual property oceeds from royalties and licensing agreen	nents	
	✓ No  Yes. Describe				7
27.			ingibles cooperative association holdings, liquor li	censes, professional licenses	
	✓ No  Yes. Describe				
Mor	ney or property owed	 to you?			Current value of the
					portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you				,
	☐ No				
	Yes. Give specific inform about them, including	allori	6 Tax Refund	Federal:	\$2829.00
	you already filed the			State:	\$0.00
20	and the tax years			Local:	\$0.00
29.	_	sum alimony, spousa	al support, child support, maintenance, divo	orce settlement, property settlement	
	✓ No  Yes. Give specific inform	ation		Alimony:	\$0.00
	Tes. Give specific inform	auor		Maintenance:	\$0.00
				Support:	\$0.00
				Divorce settlement:	\$0.00
				Property settlement:	\$0.00
30.		ability insurance pa	yments, disability benefits, sick pay, vacatic you made to someone else	on pay, workers' compensation,	
	✓ No	•	-		
	Yes. Describe				
					]

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Deb	tor 1 Sherrill	R	Pettiford	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insurance police Examples: Health, disability,		vings account (HSA); credit, ho	omeowner's, or renter's insurance	
	No	Com	pany name:	Beneficiary:	Surrender or refund value:
	Yes. Name the insurance of each policy and list its		nsurance through Emplopyer		\$0.00
					_
32.	Any interest in property the If you are the beneficiary of a property because someone h	a living trust, expect proceed		or are currently entitled to receive	
	✓ No				
	Yes. Describe				
00			en e		
33.	Examples: Accidents, employ		ave filed a lawsuit or made a claims, or rights to sue	demand for payment	
	<b>✓</b> No				
	Yes. Describe				
34.	other contingent and unli	quidated claims of every	y nature, including counterc	laims of the debtor and rights	
	<b>✓</b> No				
	Yes. Describe				
35.	Any financial assets you di	id not already list			
	✓ No  Yes. Describe				
36.			t 4, including any entries for		\$2830.00
Part	5: Describe Any Rus	iness-Related Prone	erty You Own or Have a	n Interest In. List any real estate	in Part 1
37.			in any business-related prop		mr urc ii
	✓ No. Go to Part 6.				Current value of the
	Yes. Go to line 38.				portion you own? Do not deduct secured claims or exemptions
38.	Accounts receivable or con	mmissions you already e	arned		or exemptions
	<b>✓</b> No				
	Yes. Describe				
00					
39.	Office equipment, furnish Examples: Business-related		ems, printers, copiers, fax mach	nines, rugs, telephones, desks, chairs, electr	onic devices
	<b>✓</b> No				
	Yes. Describe				

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Deb	tor 1 Sherrill		R	Pettiford	Case number (if known)	
40	First Name		Middle Name	Last Name	trode	
40.		tures, equipme	nt, supplies you	use in business, and tools of yo	ur trade	
	<b>✓</b> No					
	Yes. Desci	ribe				
41.	Inventory					
	<b>✓</b> No					
	Yes. Descri	ribe				1
	100. 2000					
			<u> </u>			
42.	Interests in pa	artnerships or	joint ventures			
	✓ No			Name of entity:	% of ownership:	
	Yes. Give			Name of chity.	70 of ownership.	
	information them	about				<u> </u>
	uiciii			-		
43. (	Customer lists,	mailing lists, o	or other compilat	tions		<u> </u>
	<b>√</b> No	<b>J</b> 212, 2				
		ur liete include n	ersonally identifial	ble information (as defined in 11 U.S	S C & 101/41A\\2	
	1cs. bo yo	ai iisis iiiolaac p	croonally lacritilal	ole information (as defined in 11 o.)	3.0. § 101(4174)):	
	☐ N	0				
	☐ Ye	es. Describe	··			
44.	Any business-	related propert	y you did not alr	eadv list		
	_		, ,	<b>,</b>		
	Yes. Give sinformation					
						<u> </u>
				-		
45. A	dd the dollar va	alue of all of yo	ur entries from F	Part 5, including any entries for p	pages you have attached	
for P	art 5. Write that	number here			<b>&gt;</b>	
Part	escribe	e Any Farm-	and Commer	cial Fishing-Related Prope	erty You Own or Have an Interes	t In.
	If you own o	or have an interes	st in farmland, list i	t in Part 1.		
46.	Do you own o	r have any lega	al or equitable in	terest in any farm- or commercia	l fishing-related property?	
	✓ No. Go to	Part 7.				Current value of the portion you own?
	Yes. Go to	line 47.				Do not deduct secured
	_					claims
						or exemptions
47.	Farm animals Examples: Live	stock, poultry, fai	m-raised fish			
	-	, podicy, rai				
	✓ No					7
	Yes. Desc	ride				

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Debto	r 1 Sherrill First Name	R Middle Name	Pettiford Last Name	Case number (if known)	_
40			Last Name		
48.	Crops-either growing	j or narvested			
	<b>✓</b> No				
	Yes. Describe				
/Q I	Farm and fishing equ	 uipment, implements, machinery, t	fixtures and tools of trac	da	
49. I	_	inprinent, implements, machinery, i	nixtures, and tools of trac	de	
	<b>✓</b> No				
	Yes. Describe				
50. I	Farm and fishing sun	oplies, chemicals, and feed			
	_	phos, orientidals, and reed			
	<b>✓</b> No				
	Yes. Describe				
51.	Any farm- and comm	ercial fishing-related property you	u did not already list		
			·		
	✓ No				
	Yes. Describe				
FO A-I	d the shellow colors of a	all of commonstation from Dont C. in al		was very barra attack ad	
37. AO		all of your entries from Part 6, incler here			
	t or trino triat riarribo	. 119.0			
for Par Part 7		roperty You Own or Have a		u Did Not List Above	
Fart 7	Oo you have other pro	operty of any kind you did not alre		u Did Not List Above	
Part 7	Oo you have other pro Examples: Season ticke			u Did Not List Above	
Part 7	Oo you have other pro	operty of any kind you did not alre		u Did Not List Above	
Part 7	Do you have other pro Examples: Season ticked No Yes. Give specific	operty of any kind you did not alre		u Did Not List Above	
Part 7	Do you have other pro Examples: Season ticked	operty of any kind you did not alre		u Did Not List Above	
Part 7	Do you have other pro Examples: Season ticked No Yes. Give specific	operty of any kind you did not alre		u Did Not List Above	
Part 7	Do you have other pro Examples: Season ticked No Yes. Give specific	operty of any kind you did not alre		u Did Not List Above	
Part 7 53. [	Do you have other pro Examples: Season ticked No Yes. Give specific information	operty of any kind you did not alre	eady list?		
Part 7 53. [	Do you have other pro Examples: Season ticked No Yes. Give specific information	operty of any kind you did not alrests, country club membership	eady list?		
Part 7 53. [	Do you have other pro Examples: Season ticked No Yes. Give specific information	operty of any kind you did not alrests, country club membership	eady list?		
Part 7 53. [ [	Do you have other processing the season ticked No Yes. Give specific information	operty of any kind you did not alrests, country club membership  all of your entries from Part 7. Write	eady list?		
Part 7 53. [	Do you have other processing the season ticked No Yes. Give specific information	operty of any kind you did not alrests, country club membership	eady list?		
Part 7 53. [	Do you have other pro- Examples: Season ticked No Yes. Give specific information  If the dollar value of a contract the co	operty of any kind you did not alrests, country club membership  all of your entries from Part 7. Write	eady list?	<b>&gt;</b>	\$138083.00
Part 7 53. [	Do you have other processing the season ticked No Yes. Give specific information the dollar value of a List the Totals	operty of any kind you did not alrests, country club membership  all of your entries from Part 7. Writes of Each Part of this Form	eady list?	<b>&gt;</b>	\$138083.00
Part 7 53. [	Do you have other processing the season ticked No Yes. Give specific information the dollar value of a List the Totals	operty of any kind you did not alrests, country club membership  all of your entries from Part 7. Writes of Each Part of this Form	eady list?	<b>&gt;</b>	\$138083.00
Part 7 53. [] 54. Add Part 8 55. Pa	Do you have other pro- Examples: Season ticked No Yes. Give specific information  If the dollar value of a limit the triangle in t	operty of any kind you did not alrests, country club membership  all of your entries from Part 7. Writes of Each Part of this Form	ite that number here	<b>&gt;</b>	\$138083.00
Part 7 53. [ ] 54. Add Part 8 55. Pa 56. pa 57.Pa	Do you have other pro- Examples: Season ticked No Yes. Give specific information  If the dollar value of a limit 1: Total real estate art 2 total vehicles, limit 3: Total personal a	all of your entries from Part 7. Writes of Each Part of this Form  In line 2	eady list?	<b>&gt;</b>	\$138083.00
Part 7 53. [ ] 54. Add Part 8 55. Pa 56. pa 57.Pa	Do you have other pro- Examples: Season ticked No Yes. Give specific information  If the dollar value of a limit the triangle in t	all of your entries from Part 7. Writes of Each Part of this Form  In line 2	ite that number here	<b>&gt;</b>	\$138083.00
Part 7 53. [ ] [ ] 54. Add Part 8 55. Pa 56. pa 57.Pa 58.Pa	Do you have other pro- Examples: Season ticked No Yes. Give specific information  If the dollar value of a season ticked information  List the Totals Int 1: Total real estate int 2 total vehicles, limit 3: Total personal a season ticked in the term of the te	all of your entries from Part 7. Writes of Each Part of this Form  In line 2	ite that number here	<b>&gt;</b>	\$138083.00
Part 7 53. [] 54. Add  Part 8 55. Pa 56. pa 57. Pa 58. Pa 59. Pa	Do you have other pro- Examples: Season ticked No Yes. Give specific information  If the dollar value of a limit to the total series total vehicles, limit 3: Total personal a limit 4: Total financial as limit 5: Total business-	all of your entries from Part 7. Writes of Each Part of this Form  In line 2	ite that number here	<b>&gt;</b>	\$138083.00
Part 7 53. [ ] 54. Add  Part 8 55. Pa 57. Pa 57. Pa 59. Pa 60. Pa	Do you have other pro- Examples: Season ticked No Yes. Give specific information  If the dollar value of a limit 1: Total real estate art 2 total vehicles, limit 3: Total personal art 4: Total financial as art 5: Total businessart 6: Total farm- and	all of your entries from Part 7. Writes of Each Part of this Form  In line 2  In a 5  In a 6  In a 6  In a 7	ite that number here	<b>&gt;</b>	\$138083.00
Part 7 53. [ ] 54. Add  Part 8 55. Pa 57. Pa 57. Pa 59. Pa 60. Pa	Do you have other pro- Examples: Season ticked No Yes. Give specific information  If the dollar value of a limit 1: Total real estate art 2 total vehicles, limit 3: Total personal art 4: Total financial as art 5: Total businessart 6: Total farm- and	all of your entries from Part 7. Writes of Each Part of this Form  In the second of th	ite that number here	<b>&gt;</b>	\$138083.00
Part 8 55. Pa 55. Pa 55. Pa 56. pa 57. Pa 58. Pa 60. Pa 61. Pa	Do you have other pro- Examples: Season ticked No Yes. Give specific information  If the dollar value of a limit is the Totals art 1: Total real estate art 2 total vehicles, limit 3: Total personal art 4: Total financial as art 5: Total businessart 6: Total farm- and art 7: Total other property.	all of your entries from Part 7. Writes of Each Part of this Form  In line 2  In a 5  In a 6  In a 6  In a 7	\$1100.00 \$2830.00		
Part 8 55. Pa 55. Pa 55. Pa 56. pa 57. Pa 58. Pa 60. Pa 61. Pa	Do you have other pro- Examples: Season ticked No Yes. Give specific information  If the dollar value of a limit is the Totals art 1: Total real estate art 2 total vehicles, limit 3: Total personal art 4: Total financial as art 5: Total businessart 6: Total farm- and art 7: Total other property.	operty of any kind you did not alrests, country club membership  all of your entries from Part 7. Write  of Each Part of this Form  d, line 2	### state that number here	<b>&gt;</b>	\$138083.00 +\$3930.00
Part 8 55. Pa 55. Pa 55. Pa 56. pa 57. Pa 58. Pa 60. Pa 61. Pa	Do you have other pro- Examples: Season ticked No Yes. Give specific information  If the dollar value of a limit is the Totals art 1: Total real estate art 2 total vehicles, limit 3: Total personal art 4: Total financial as art 5: Total businessart 6: Total farm- and art 7: Total other property.	operty of any kind you did not alrests, country club membership  all of your entries from Part 7. Write  of Each Part of this Form  d, line 2	\$1100.00 \$2830.00		+\$3930.00
Part 7 53. [ ] 54. Add  Part 8 55. Pa 56. pa 57.Pa 58.Pa 60. Pa 61. Pa 62. To	Do you have other pro- Examples: Season ticked No Yes. Give specific information  If the dollar value of a limit at 1: Total real estate at 2 total vehicles, limit 3: Total personal at 4: Total financial as at 4: Total financial as at 5: Total businessate 6: Total farm- and at 7: Total other proposed personal property	operty of any kind you did not alrests, country club membership  all of your entries from Part 7. Write  of Each Part of this Form  d, line 2	\$1100.00 \$2830.00	Copy personal property total	

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Fill in this information to identify your case:						
Debtor 1	Sherrill First Name	R Middle Name	Pettiford Last Name			
Debtor 2 (Spouse, if filin	g) First Name	Middle Name	Last Name			
United States I	Bankruptcy Court for the:	Northern	District of Illinois(State)			
Case number (If known)			(Ciaio)			

#### Official Form 106C

#### Check if this is an amended filing

#### Schedule C: The Property You Claim as Exempt

correct

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Par	t 1: Identify the Property You Clai	im as Exempt		
1. 2.	Which set of exemptions are you claiming.  You are claiming state and federal nonb.  You are claiming federal exemptions. 19  For any property you list on Schedule Avenue.	ankruptcy exemptions.  I U.S.C. § 522(b)(2)	11 U.S.C. § 522(b)(3)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption
	Brief description: Used Furniture Line from Schedule A/B:06	\$300.00	\$300.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
	Brief description:  Used Clothes  Line from Schedule A/B:11	\$500.00	\$500.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)
3.	Are you claiming a homestead exemptio (Subject to adjustment on 4/01/19 and every  No  Yes. Did you acquire the property covere  No  Yes	3 years after that for ca		

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	Sherrill		Pettiford	Case number (if known)	
F	irst Name	Middle Name	Last Name		
rt 2: A	dditional Page				
	description of the property a n Schedule A/B that lists this rty			exemption you claim box for each exemption.	Specific laws that allow exemption
		Copy the value from Schedule A/B			
Brief			_		735 ILCS 5/12-1001(b)
descrip		\$300.00	✓	\$300.00	
	)TV (1)Cellphone		100% of fair	market value, up to any	=
Line fro	om /ule A/B:			statutory limit	
Brief		04.00	_		735 ILCS 5/12-1001(b)
descrip		\$1.00	$\checkmark$	\$1.00	
	hase Bank		100% of fair	market value, up to any	_
Line fro	om  ule A/B:17		applicable s	statutory limit	
Brief					735 ILCS 5/12-1001(f)
descrip		\$0.00	✓	\$0	
	fe Insurance through mplopyer			market value, up to any	-
Line fro	om Jule A/B:31		аррії саріє з	nation y mint	
Brief					735 ILCS 5/12-1001(b)
descrip	otion:	\$2,829.00	<b>✓</b>	\$2,829.00	
20	116 Tax Refund		100% of fair	market value, up to any	-
Line fro	om			statutory limit	

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Fill in	this inform	ation to identify your case:	:				
Debto	or 1	Sherrill	R	Pettiford			
DCDI	J1 1	First Name	Middle Name	Last Name			
Debto							
(Spot	ıse, if filing	) First Name	Middle Name	Last Name			
Unite	d States Ba	ankruptcy Court for the:	Northern	District of Illinois			
Case	number			(State)			
(If kno				_			
Off	icial F	orm 106D			•		Check if this is a
			ore Who Ha	ve Claims Secur	od by Pro		mended filing
							12/1
				are filing together, both are equal e entries, and attach it to this form			
•		er (if known).	ago, mi it oat, namber tire	oritinos, and attaon it to ano form	ii. On the top of they	additional pages, write	o your name
1. <b>I</b>	Do any cre	editors have claims secu	red by your property?				
[	No. Cl	neck this box and submit th	nis form to the court with you	ur other schedules. You have nothing	else to report on this t	form.	
	✓ Yes. F	ill in all of the information b	pelow.				
Part '	1: List	All Secured Claims					
2.	List all se	ecured claims. If a credito	r has more than one secure	ed claim, list the creditor separately	Column A	Column B	Column C
			•	list the other creditors in Part 2. As	Amount of claim	Value of	Unsecured
	much as p	oossible, list the claims in a	alphabetical order accordin	g to the creditor's name.	Do not deduct the	collateral	portion
					value of collateral.	that supports this claim	If any
2.1		nicago Heights	Describe the property t	hat secures the claim:	\$1,995.50	\$0.00	\$1,995.50
	Creditor's 39773 Tr	Name easury Center	Code Violation				
	Numbe			the claim is: Check all that apply.			
			Contingent				
	Chicago	Illinois 60694	Unliquidated				
	City Who ow	State ZIP Code es the debt? Check one.	Disputed				
	<b>✓</b> Debte	or 1 only	Nature of lien. Check al	I that apply.			
		or 2 only	An agreement you m car loan)	nade (such as mortgage or secured			
		or 1 and Debtor 2 only		as tax lien, mechanic's lien)			
	At lea	ast one of the debtors and er	Judgment lien from a				
		ck if this claim relates	Other (including a rig	tht to offset) Code Violation			
	Date deb	community debt t was	Last 4 digits of accoun	t number			
[a]	Chase M	o when a co				<b>^</b>	<b>AFF</b> 000 00
2.2	Chase Mo Creditor's		Describe the property t		\$125,000.00	\$70,000.00	<u>\$55,000.00</u>
	PO Box 2			rago, IL 60690   Value: \$70,000.00 the claim is: Check all that apply.			
		Olicet .	Contingent	and diaminor or or ook all that appriy.			
	Columbu	us Ohio 43224	Unliquidated				
	City	State ZIP Code	Disputed				
		es the debt? Check one. or 1 only	Nature of lien. Check al	I that apply.			
		or 2 only	✓ An agreement you m	nade (such as mortgage or secured			
		or 1 and Debtor 2 only	car loan)				
		ast one of the debtors and		as tax lien, mechanic's lien)			
	anoth Chec	er ck if this claim relates	Judgment lien from a Other (including a rig				
	to a	community debt	_	· · · · · · · · · · · · · · · · · · ·			
	Date deb incurred	. was	Last 4 digits of accoun	t number			
		Add the dollar value of y	your entries in Column A	on this page. Write that	\$126,995.50		

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Debtor 1 Sherrill	F	R //iddle Name	Pettiford Last Name	Case n	umber (if known)		
Part:1 After list	onal Page		them beginning with 2		Column A  Amount of claim  Do not deduct the value of collateral.	Column B  Value of collateral that supports this claim	Column C Unsecured portion If any
Commons Cond  Creditor's Name  33 W Monroe S  Number  Chicago Illin  City Sta  Who owes the  Debtor 1 onl  Debtor 2 onl  At least one another	Street  nois 60603  Ite ZIP Code debt? Check one.  ly ly d Debtor 2 only of the debtors and is claim relates to a	Assessments for As of the date y Contingent Unliquidated Disputed Nature of lien. ( An agreeme car loan) Statutory lier Judgment lie	operty that secures the 2605 S Indiana Ave, Chiou file, the claim is: Chid  Check all that apply.  In you made (such as more in (such as tax lien, mechan from a lawsuit ling a right to offset)  account number	cago, IL 60616 eck all that apply.	\$8,858.05	\$0.00	<u>\$8,858.05</u>
City Sta Who owes the Debtor 1 onl Debtor 2 onl Debtor 1 and At least one another	Street  Street  nois 60602  Ite ZIP Code debt? Check one.  by  by d Debtor 2 only of the debtors and  is claim relates to a	Property Taxes  As of the date y Contingent Unliquidated Disputed  Nature of lien. ( An agreeme car loan) Statutory lier Judgment lie	operty that secures the ou file, the claim is: Check all that apply.  In the claim is:	eck all that apply.  ortgage or secured  anic's lien)	\$12,183.11	\$68,083.00	\$0.00
here: If this	·		ımn A on this page. Wi		\$21,041.16 \$148,036.66		

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Debto	or 1 Sherrill	R	Pettiford	Case number (if known)			
	First Name	Middle Name	Last Name				
Part 2	List Others to Be	Notified for a Del	ot That You Already I	Listed			
age you	ncy is trying to collect fro	om you for a debt you ditor for any of the de	owe to someone else, list bts that you listed in Part	for a debt that you already listed in Part 1. For example, if a collection t the creditor in Part 1, and then list the collection agency here. Similarly, if t 1, list the additional creditors here. If you do not have additional a page.			
1 ,	Calant Dantalia Cam.			On which line in Part 1 did you enter the creditor?			
-	Select Portfolio Serv  Name			2.2			
	Name PO Box 6525						
-	Number Street			Last 4 digits of account number			
N							
5	Salt Lake Clty	Utah	84165				
(	City	State	Zip Code				
1	ARNSTEIN & LEHR  Name 120 S Riverside  Number Street			On which line in Part 1 did you enter the creditor?  2.3  Last 4 digits of account number			
-	Chicago	Illinois	60606				
(	City	State	Zip Code				

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Fill	in this inform	ation to identify your cas	e:					
De	btor 1	Sherrill	R	Pettiford				
		First Name	Middle Name	Last Name	-			
	btor 2 ouse, if filing	First Name	Middle Name	Last Name	-			
Uni	ited States Ba	ankruptcy Court for the:	Northern	_ District of Illinois (State)	-			
	se number			(Glale)	_			
<u> </u>	nown)							
<u>Of</u>	ficial Fo	orm 106E/F				∐ Cr	neck if this is ar	n amended filing
So	chedu	le E/F: Cre	editors Who	<b>Have Unsecur</b>	ed Claims			12/15
part 106/ that entr know	y to any exe VB) and on are listed in ies in the bo wn).	cutory contracts or un Schedule G: Executor Schedule D: Creditor exes on the left. Attach	expired leases that could in y Contracts and Unexpire S Who Hold Claims Secur	rs with PRIORITY claims and F result in a claim. Also list exec d Leases (Official Form 106G). red by Property. If more space this page. On the top of any a	utory contracts on Sch Do not include any cre is needed, copy the Pa	edule A/B editors with art you nee	e: Property (O h partially sec ed, fill it out, r	fficial Form cured claims number the
1.	Do any cre	editors have priority ur	secured claims against yo	ou?				
	✓ No. G	o to Part 2.						
	Yes.							
2.	listed, ident much as po Continuation	ify what type of claim it is ossible, list the claims in on Page of Part 1. If more	s. If a claim has both priority a alphabetical order according e than one creditor holds a p	ore than one priority unsecured of and nonpriority amounts, list that of to the creditor's name. If you have articular claim, list the other cred or this form in the instruction bookless.	claim here and show both re more than two priority itors in Part 3.	n priority an	d nonpriority a	mounts. As
						Total	Priority	Nonpriority

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Debto	or 1 Sherrill First Name	R Middle Name	Pettiford Last Name	Case number	(if known)	
Derrie						
Part 2						
3. I	Do any creditors have nonprior	-	-			
	No. You have nothing to repo	ort in this part. Submit this for	m to the court with	your other schedules.		
	✓ Yes.					
	List all of your nonpriority unse					
	unsecured claim, list the creditor s f more than one creditor holds a p					
	Page of Part 2.			) • • • • • • • • • • • • • • • • •		
						Total claim
4.1	cb/carson		last 4 o	ligits of account number	1274	\$316.00
	Nonpriority Creditor's Name PO BOX 15521			as the debt incurred?	6/1/2015	
	Number Street		writeri w	as the debt incurred?	6/1/2015	
				e date you file, the claim is	s: Check all that apply.	
	Wilmington Delay	ware 19805		tingent		
	City State	zip Code	Unli	quidated		
	Who incurred the debt? Chec	ck one.	Disp	outed		
	Debtor 2 only		Type of	NONPRIORITY unsecured	d claim:	
	<u>'</u>		Stud	dent loans		
	Debtor 1 and Debtor 2 only		Obli	gations arising out of a sepa	aration agreement or divorce	
	At least one of the debtors a			you did not report as priority		
	Check if this claim relates	•	Deb	ts to pension or profit-sharir	ng plans, and other similar	
	Is the claim subject to offset	?			itCard	
	✓ No		_			
	Yes					
4.2	ENHANCED RECOVERY CO Nonpriority Creditor's Name	L	Last 4 c	ligits of account number	7046	\$300.00
	8014 BAYÉERRY RD		When w	as the debt incurred?	6/1/2016	
	Number Street		As of th	e date you file, the claim is	s: Check all that apply	
				itingent	S. Oncok all that apply.	
	JACKSONVILLE Florid City State			quidated		
	City State Who incurred the debt? Chec	•	=	outed		
	✓ Debtor 1 only			NONPRIORITY unsecured	d claim:	
	Debtor 2 only			dent loans	d Oldiiii.	
	Debtor 1 and Debtor 2 only				aration agreement or diverse	
	At least one of the debtors a	another		you did not report as priority	aration agreement or divorce claims	
	Check if this claim relates	s to a community debt	Deb	ts to pension or profit-sharir	ng plans, and other similar	
	Is the claim subject to offset		debi		· Oallandan fan	
	<b>✓</b> No		<b>✓</b> Oth	out Collection er. Specify ORIGINAL CR	n; Collecting for REDITOR: AT T	
	Yes			. ,		
4.3	Florida Hospital Orlando		last 4 o	ligits of account number		\$600.00
	Nonpriority Creditor's Name 601 E Rollins St			vas the debt incurred?	 n/a	
	Number Street			_		
				e date you file, the claim is	s: Check all that apply.	
			=	tingent		
	Orlando Florio		=	quidated		
	City State Who incurred the debt? Chec	•	Disp	outed		
	✓ Debtor 1 only		Type of	NONPRIORITY unsecured	d claim:	
	Debtor 2 only		Stud	dent loans		
	Debtor 1 and Debtor 2 only				aration agreement or divorce	
	At least one of the debtors a	and another		you did not report as priority		
	Check if this claim relates		L Deb	ots to pension or profit-sharir ts	ig plans, and other similar	
	Is the claim subject to offset	•			cal Bill	
	✓ No					
	Yes					
1	- <del></del>					

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Pettiford Debtor 1 Sherrill Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim GOLDKEY CRED** 4.4 \$59.00 Last 4 digits of account number \_ Nonpriority Creditor's Name P O BOX 15670 When was the debt incurred? 12/1/2015 Number As of the date you file, the claim is: Check all that apply. Contingent **BROOKSVILLE** 34604 Florida Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only lacksquareType of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? **✓** Collection; Collecting for **✓** No ORIGINAL CREDITOR: Other. Specify **MEDICAL** Yes 4.5 MAB&T-SCUSA \$2,027.00 Last 4 digits of account number 0417 Nonpriority Creditor's Name CREDIT BUREAU REPO POB 961245 When was the debt incurred? 8/1/2015 Number As of the date you file, the claim is: Check all that apply. Contingent FORT WORTH 76181 Texas Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? CreditCard Other. Specify **V** No Yes **MERCHANTS & MEDCAL** 4.6 \$137.00 Last 4 digits of account number \_\_\_\_ Nonpriority Creditor's Name 6324 TAYLOR DR When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent **FLINT** Michigan 48507 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? 001 Collection; Collecting for **✓**  $\checkmark$ No ORIGINAL CREDITOR:

Yes

Other. Specify

MEDICAL PAYMENT DATA

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Pettiford Debtor 1 Sherrill Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 MIDLAND FUNDING \$862.00 Last 4 digits of account number Nonpriority Creditor's Name 2365 Northside Drive When was the debt incurred? 6/1/2015 Number As of the date you file, the claim is: Check all that apply. Contingent California 92108 San Diego Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify 001 UnknownLoanType **✓** No Yes MIDLAND FUNDING 4.8 \$688.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2365 Northside Drive 7/1/2015 Number As of the date you file, the claim is: Check all that apply. Contingent 92108 San Diego California Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? 001 UnknownLoanType Other. Specify **✓** No Yes NORTH AMERCN 4.9 \$462.00 Last 4 digits of account number 6677 Nonpriority Creditor's Name POB 182221 When was the debt incurred? 1/1/2016 Number As of the date you file, the claim is: Check all that apply. Contingent **CHATTANOOGA** Tennessee 37422 Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? **✓** Collection; Collecting for **✓** No ORIGINAL CREDITOR:

Yes

Other. Specify

**MEDICAL** 

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Debtor 1		R	Pettiford	Case number	er (if known)	
	First Name	Middle Name	Last Name			
Part 2:	Your NONPRIORITY Uns	secured Claims -	Continuatio	n Page		
	After listing any entries on this	page, number them	beginning with	4.5, followed by 4.6, and so	forth.	Total claim
*****	Northwestern Medical Group		Las	st 4 digits of account number	er	\$2,000.00
	Nonpriority Creditor's Name 26609 Network place		Wr	en was the debt incurred?	n/a	
	Number Street		As	of the date you file, the clain	n is: Check all that apply.	
	Chicago Illinois	60673		Contingent		
	City State	Zip Code	e 🗌	Unliquidated		
City <b>Wh</b>	Who incurred the debt? Check Debtor 1 only	one.		Disputed		
	<u> </u>		Тур	e of NONPRIORITY unsecu	red claim:	
	Debtor 2 only			Student loans		
	Debtor 1 and Debtor 2 only			Obligations arising out of a se	eparation agreement or divorc	е
	At least one of the debtors and	d another		that you did not report as prio		
	Check if this claim relates t	to a community debt		Debts to pension or profit-shadebts	aring plans, and other similar	
	Is the claim subject to offset?				dical Bill	
	<b>✓</b> No		•	Other. Specify IVIE	uicai Diii	
	Yes					

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Debtor 1	Sherrill First Name		R Middle Name	Pettiford Last Name	Case nur	mber (if known)
Part 3:			About a Debt Tha		ted	
col age you	lection agency is trency here. Similarly, and not have addit	ying to collec if you have m	t from you for a debt yo	ou owe to someone of for any of the debts t	else, list the orig hat you listed in	already listed in Parts 1 or 2. For example, if a inal creditor in Parts 1 or 2, then list the collection Parts 1 or 2, list the additional creditors here. If or submit this page.
AT Na				On which entry in	Part 1 or Part 2	did you list the original creditor?
	Po Box 5014 Number Street			Line 4.2	_of (Check one):	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
<u>Ca</u> Cit	rol Stream v	Illinois State	60197 Zip Code	Last 4 digits of ac	count number_	7046

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Pettiford Sherrill Debtor 1 Case number (if known) First Name Add the Amounts for Each Type of Unsecured Claim Part 4: Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 Total claims 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$0.00 **Total claims** 6f. Student loans 6f. from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims \$0.00 6h. Debts to pension or profit-sharing plans, and other similar 6h. \$7,451.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$7,451.00

6j. Total. Add lines 6f through 6i.

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Debtor 1	Sherrill	R	Pettiford
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if fil	ing) First Name	Middle Name	Last Name
United States	s Bankruptcy Court for the:	Northern	District of Illinois
			(State)
Case numbe	r		, ,

Check if this is a
amended filing

#### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Fill in this inf	ormation to identify your c	ase.		
Debtor 1		R	Pettiford	
Debior 1	Sherrill First Name	Middle Name	Last Name	-
Debtor 2				
(Spouse, if fi	ling) First Name	Middle Name	Last Name	_
United State	s Bankruptcy Court for the	: Northern	District of Illinois	
			(State)	_
Case number (If known)	er			_
O((; -; -	15 40011			Check if this is an amended filing
Officia	I Form 106H			
Sched	ule H: Your C	Codebtors		12/15
1. Do you  No	)	you are filing a joint case, do	not list either spouse as a codel	otor.)
Idaho, L		u lived in a community propexico, Puerto Rico, Texas, Was	• •	munity property states and territories include Arizona, California,
		spouse, or legal equivalent liv	e with you at the time?	
	No		•	
	Yes. In which communit	y state or territory did you live?	Fill in th	e name and current address of that person.
	Name of your spouse	, former spouse, or legal equiv	valent	
	Number Street			
	City	State	Zip Code	
		-		r spouse is filing with you. List the person shown in line 2 listed the creditor on <i>Schedule D</i> (Official Form 106D),

Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

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Fill in this	nformation to identif					
	nformation to identif		D #15 1			
Debtor 1	Sherrill First Name	R Middle Name	Pettiford Last Nam	e.		
Debtor 2	i not riamo	Wildio Hamo	Zaot Harri	•		Check if this is:
(Spouse, if filing	<sup>ng)</sup> First Name	Middle Name	Last Nam	е	•	An amended filing
United States	Bankruptcy Court for the:	Northern	District of Illinoi			A supplement showing post-petition chapter 1 expenses as of the following date:
Case number (If known)			(Oldin			MM / DD / YYYY
Official	Form 106I				<u>-</u>	
Schedu	ıle I: Your Ind	come				12/1:
include info additional p	ormation about you	r spouse. If more spa ame and case numbe	ice is needed,	attach a se	eparate sh	ise is not filing with you, do not eet to this form. On the top of any n.
	ll in your employment		Debtor 1			Debtor 2
	formation.  You have more than one o,	Employment status	Employed  Not Emplo	yed		Employed  Not Employed
	ach a separate page with ormation about additional	Occupation				
	nployers.	Employer's name				
or	clude part time, seasonal,  If-employed work.	Employer's address	Number Street			Number Street
	ccupation may include udent					
or	homemaker, if it applies.		City	State	Zip Code	City State Zip Code
		How long employed there?				
	_	-	ou have nothing to	report for any li	ne, write \$0 in	the space. Include your non-filing spouse unless
	non-filing spouse have mo arate sheet to this form.	ore than one employer, combi	ine the information			on on the lines below. If you need more space,  For Debtor 2 or
				For De	btor 1	non-filing spouse
		ry, and commissions (befor alculate what the monthly wag			\$1,910.39	
3. Estima	te and list monthly over	time pay.	3.		+ \$0.00	

\$1,910.39

4. Calculate gross income. Add line 2 + line 3.

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Debto	or 1 Sherrill R	Pettiford	Case number (	(if known)	
	First Name Middle Name	Last Name	For Debtor 1	For Debtor 2 or non-filing spouse	
Co	py line 4 here	<b>→</b> 4.	\$1,910.39		
5. <b>Lis</b>	t all payroll deductions:				
5a	a. Tax, Medicare, and Social Security deductions	5a	\$322.86		
5b	. Mandatory contributions for retirement plans	5b	\$0.00		
50	. Voluntary contributions for retirement plans	5c	\$13.28		
50	Required repayments of retirement fund loans	5d	\$0.00		
5e	e. Insurance	5e	\$224.21		
5f.	Domestic support obligations	5f	\$0.00		
50	g. Union dues	5g	\$21.67		
5h	n. Other deductions. Specify:	5h. + _	\$0.00 +		
6. <b>Ad</b> +5h.	d the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e -	+5f + 5g 6	\$582.0 <u>1</u>		
7. <b>Ca</b>	Iculate total monthly take-home pay. Subtract line 6 from lin	ne 4. 7	\$1,328.38		
	t all other income regularly received:				
8a	<ul> <li>Net income from rental property and from operating a business, profession, or farm</li> <li>Attach a statement for each property and business showing of</li> </ul>	aross			
	receipts, ordinary and necessary business expenses, and the monthly net income.		\$0.00		
8b	. Interest and dividends	8b	\$0.00		
80	Family support payments that you, a non-filing spouse dependent regularly receive				
	Include alimony, spousal support, child support, maintenance divorce settlement, and property settlement.	8c	\$0.00		
	l. Unemployment compensation	8d	\$0.00		
	e. Social Security	8e	\$0.00		
8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-ca assistance that you receive, such as food stamps (benefits unthe Supplemental Nutrition Assistance Program) or housing subsidies	ash			
	Specify:	8f	\$0.00		
	p. Pension or retirement income	8g	\$0.00		
8h	n. Other monthly income. Specify:	8h. +	\$0.00 +		
9. <b>Ad</b>	<b>d all other income</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g	g + 8h. 9	\$0.00		
	alculate monthly income. Add line 7 + line 9. dd the entries in line 10 for Debtor 1 and Debtor 2 or non-filing	spouse	\$1,328.38 +	=	\$1,328.38
Ind re	tate all other regular contributions to the expenses that you clude contributions from an unmarried partner, members of you latives.	r household, your deper	ndents, your roommates		
Sp	pecify:			1	1. + \$0.00
	dd the amount in the last column of line 10 to the amoun rite that amount on the Summary of Schedules and Statistical S				2. \$1,328.38
**	a a our and our many or our rounds during statistical C	Samuraly of Gordan Eldi.	Holdied Data,	αργιισο	Combined monthly income
13. <b>D</b>	o you expect an increase or decrease within the year after No.	r you file this form?			
L	Yes. Explain:				

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Fill in this inform	mation to identify your ca	ase:				
Debtor 1	Sherrill	R	Pettiford			
	First Name	Middle Name	Last Name			
Debtor 2	a) <del>=:</del>	ACTUAL AT		Check if this is:		
(Spouse, if filin	9) First Name	Middle Name	Last Name	An amended filing	3	
United States E	Bankruptcy Court for the	Northern	District of Illinois		owing post-petition chapter 13	3
Case number			(State)	expenses as of th	e following date:	
(If known)				MM / DD / YYYY	<del>,                                      </del>	
Official	Form 106J					
-	le J: Your E	xpenses				12/15
		•	e filing together, both are equally r	esnonsible for supply	ving correct	
information. If			form. On the top of any additional			
	cribe Your House	hold				
1. Is this a join		iioiu				
	to line 2					
Yes. D	oes Debtor 2 live in a	separate household?				
	No					
	Yes. Debtor 2 must f	file Official Forms 106J-2, <i>Expens</i>	ses for Separate Household of Debto	· 2.		
2. Do you hav dependents?		No				
Do not list D Debtor 2.		Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?	
	penses include of people other	No				
than						
yourself and dependent	d your $\square$	Yes				
uepenuent	<b>5</b> :					
Part 2: Esti	mate Your Ongoin	g Monthly Expenses				
-	of a date after the ban		ou are using this form as a suppliplemental Schedule J, check the I	•	-	
		-cash government assistance I it on Schedule I: Your Income			Your expenses	8
4. The rental	or home ownership e	xpenses for your residence. Ind	clude first mortgage payments and		\$77	72.00
	or the ground or lot. 4.	•	3 3 1 1 7 1 1 1 1 1 1 1		4.	
	uded in line 4:					
4a. Real e	state taxes				4a <b>\$</b>	00.00
4b. Proper	ty, homeowner's, or ren	ter's insurance			4b <b>\$</b>	00.00
4c. Home	maintenance, repair, and	l upkeep expenses			4c. \$	0.00
4d. Home	owner's association or co	ondominium dues			4d. <b>\$50</b>	00.00

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Debtor 1 Sherrill First Name	R Middle Name	Pettiford Last Name	Case number (if known)		
					Your expenses
5. Additional mortgage paym	ents for your residence, suc	ch as home equity loans		5.	\$0.0
5. Utilities:				<b>.</b>	
6a. Electricity, heat, natural	gas			6a.	\$150.0
6b. Water, sewer, garbage of	collection			6b.	\$0.0
6c. Telephone, cell phone, Ir	nternet, satellite, and cable sen	vices		6c.	\$150.0
6d. Other. Specify:				6d	\$0.0
. Food and housekeeping s	upplies			7.	\$300.0
. Childcare and children's e	ducation costs			8.	\$0.0
. Clothing, laundry, and dry	cleaning			9.	\$100.0
0. Personal care products a	nd services			10.	\$100.0
1. Medical and dental expens	ses			11.	\$0.0
Transportation. Include ga     Do not include car payment	as, maintenance, bus or train fa ts	are.		12.	\$200.0
3. Entertainment, clubs, rec	reation, newspapers, magaz	ines, and books		13.	\$0.0
4. Charitable contributions	and religious donations			14.	\$0.0
5. <b>Insurance.</b> Do not include insurance de	ducted from your pay or include	ed in lines 4 or 20.			
15a. Life insurance				15a	\$0.0
15b. Health insurance				15b	\$0.0
15c. Vehicle insurance				15c	\$0.0
15d. Other insurance. Specif	fy:			15d	\$0.0
	deducted from your pay or incl				
Specify:				16	\$0.0
7. Installment or lease paym	ents:			10	
17a. Car payments for Vehic	cle 1			17a	\$0.0
17b. Car payments for Vehic	cle 2			17b	\$0.0
17c. Other. Specify:				17c	\$0.0
17d. Other. Specify:				17d	\$0.0
	y, maintenance, and suppor Jule I, Your Income (Official I		s deducted from	18.	\$0.0
, , ,	e to support others who do i	,		10.	
				19.	\$0.0
	ses not included in lines 4 c		dule I: Your Income.	10.	
20a. Mortgages on other pro	operty			20a	\$0.0
20b. Real estate taxes.				20b	\$0.0
20c. Property, homeowner's	, or renter's insurance			20c	\$0.0
20d. Maintenance, repair, and	d upkeep expenses.			20d	\$0.0
20e. Homeowner's associati	ion or condominium dues			20e	\$0.0

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Debtor 1		R	Pettiford	Case number (if known)		
	First Name	Middle Name	Last Name			
21.Other	. Specify:				21	\$0.00
	ılate your monthly exp	penses.				\$2,272.00
22a. <i>A</i>	Add lines 4 through 21.					\$0.00
22b. C	Copy line 22 (monthly ex	xpenses for Debtor 2), if any, fro	m Official Form 106J-2			\$2,272.00
22c. A	add line 22a and 22b. Th	ne result is your monthly expens	ses.		22.	
23.Calcu	late your monthly net	t income.				
23a. C	Copy line 12 (your comb	ined monthly income) from Sch	edule I.		23a	\$1,328.38
23b. C	Copy your monthly exper	nses from line 22 above.			23b	\$2,272.00
	, ,	penses from your monthly incor	ne.			(\$943.62)
•	The result is your month	nly net income.			23c	
24. <b>Do y</b> o	ou expect an increase	or decrease in your expense	es within the year after you	u file this form?		
Fore	avamnle, do vou evnect	to finish paying for your car loar	within the year or do you ex	pect vour		
		ase or decrease because of a n				
<b>✓</b> 1	No					
	⁄es					
_	Evalois horse					
	Explain here:					
	<u>-</u>					<del></del>

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Fill in this information to identify your case:								
Debtor 1	Sherrill	R	Pettiford					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing	First Name	Middle Name	Last Name					
United States B	District of Illinois							
Case number (If known)			(State)					

#### Official Form 106Dec

Check if this is an
amended filing

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t1: Sign Below							
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?							
	<b>☑</b> No							
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).						
	Under penalty of perjury, I declare that I have read the summary at that they are true and correct.	nd schedules filed with this declaration and						
×	/s/ Sherrill Pettiford	×						
	Signature of Debtor 1	Signature of Debtor 2						
	Date 10/6/2016	Date						
	MM/DD/YYYY	MM/DD/YYYY						

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Fill in this information to identify your case:							
Debtor 1	Sherrill	R	Pettiford				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing	First Name	Middle Name	Last Name				
United States B	ankruptcy Court for the:	Northern	District of Illinois				
		-	(State)				
Case number							
(If known)							

### Official Form 107

Check if this is an amended filing

#### Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part	Part 1: Give Details About Your Marital Status and Where You Lived Before								
1.	Wha	at is your curre	ent marital st	atus?					
	✓	Married Not married							
2.	2. During the last 3 years, have you lived anywhere other than where you live now?								
	✓ No  Yes. List all of the places you lived in the last 3 year		ears. Do not include where yo	ou live now.					
		Debtor 1:			Dates Debtor 1 lived there	Debtor 2:			Dates Debtor 2 lived there
						Same as	Debtor 1		Same as Debtor 1
		Number Street		From	Number Stre	Number Street		From	
					To				То
		City	State	Zip Code		City	State	Zip Code	
	_					Same as	Debtor 1		Same as Debtor 1
		Number Street			From	Number Stre	et		From
					To				То
		City	State	Zip Code		City	State	Zip Code	
	Withir territor	n the last 8 year ries include Arizo	ona, California	ver live with a spo a, Idaho, Louisiana	buse or legal equivalent in, Nevada, New Mexico, Puer ebtors (Official Form 106H).			or territory? (Co.	mmunity property states and

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Debt	or 1		Pettii e Name Last N	-	umber (if known)	
				varrie		
Part	2:	Explain the Sources of Your	Income			
	Fill i	you have any income from employn in the total amount of income you receive vities. If you are filing a joint case and you No Yes. Fill in the details.	ed from all jobs and all busi	nesses, including part-time		ars?
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		rom January 1 of current year until ne date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$16811.32	Wages, commissions, bonuses, tips Operating a business	
		or last calendar year: lanuary 1 to December 31, 2015 ) YYYY	Wages, commissions, bonuses, tips Operating a business	\$37550.00 Wages, commissions, bonuses, tips Operating a business		
		or the calendar year before that: lanuary 1 to December 31, 2014 ) YYYY	Wages, commissions, bonuses, tips Operating a business	\$30000.00	Wages, commissions, bonuses, tips Operating a business	
l b	nclu bene base List 6	you receive any other income during de income regardless of whether that incefit payments; pensions; rental income; in and you have income that you received each source and the gross income from No  Yes. Fill in the details.	come is taxable. Examples on terest; dividends; money of together, list it only once und	of other income are alimony; ch ollected from lawsuits; royalties; der Debtor 1.	and gambling and lottery winni	
•			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
		From January 1 of current year until he date you filed for bankruptcy:				
		For last calendar year:  January 1 to December 31, 2015 )  YYYY				
		For the calendar year before that:  January 1 to December 31, 2014 YYYY	-			

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ebtor 1	Sherrill First Name		R Middle Name	Pettiford Last Name	Case numb	per (if known)	
rt 3:	List Certain	n Paymen	ts You Made Be	efore You Filed for I	Bankruptcy		
Aro	oithar Dahtar	l's or Dobto	r 2's dobte primar	ily consumer debts?	•		
_	No. <b>Neither D</b>	ebtor 1 nor	•	narily consumer debts. C	consumer debts are defined	in 11 U.S.C. § 101(8) as "incu	rred by an individual
					editor a total of \$6,425* or mo	ore?	
	☐ No. G	o to line 7.	•				
	Yes.	total amount	you paid that credit	or. Do not include payment	or more in one or more pay ts for domestic support oblig an attorney for this bankrup	ations, such as	
	* Subject t	o adjustment	on 4/01/19 and eve	ry 3 years after that for cas	es filed on or after the date o	of adjustment.	
<b>✓</b>	Yes. <b>Debtor 1</b>	or Debtor 2	or both have prim	narily consumer debts.			
	During the	90 days befo	ore you filed for bank	kruptcy, did you pay any cre	editor a total of \$600 or more	?	
	✓ No. G	o to line 7.					
Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.							
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Creditor's Nan	ne					Mortgage Car
	Number Street						Credit card Loan repayment
	City	State	Zip Code				Suppliers or vendors Other
_	Creditor's Nan	ne					Mortgage Car
	Number Street						Credit card Loan repayment
	City	State	Zip Code				Suppliers or vendors  Other
_	Creditor's Nan	ne					Mortgage Car
	Number Street						Credit card Loan repayment
	City	State	Zip Code				Suppliers or vendors  Other

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Debtor 1	Sherrill First Name	R Middle Name		tiford Name	Case number (i	f known)
Insid corp age	ders include your rela porations of which you	bu filed for bankruptcy, dictives; any general partners; a are an officer, director, per a business you operate as a d alimony.	relatives of any goon in control, or	eneral partners; par owner of 20% or mo	tnerships of which y are of their voting sec	ou are a general partner; curities; and any managing
<b>✓</b>	No Yes. List all payment	ts to an insider.				
	, ,		Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name					
	Number Street					
-	City St	ate Zip Code				
	Insider's Name					
	Number Street					
	City St	ate Zip Code				
	hin 1 year before yo der?	ou filed for bankruptcy, did	you make any p	payments or trans	fer any property o	n account of a debt that benefited an
Inclu	ude payments on deb	ts guaranteed or cosigned by	an insider.			
		s that benefited an insider.				
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
						Include creditor's name
	Insider's Name					
	Number Street					
	City St	ate Zip Code				
	Insider's Name					
	Number Street					
	City St	ate Zip Code				

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Deb	otor 1	Sherrill First Name	R Middle Name	Pettiford Last Name	c	Case number (if	known)	
Dor	t 4:			ons, and Foreclosure	•			
9.	<b>With</b> List a	in 1 year before yo	u filed for bankruptcy, we	re you a party in any lawsu	iit, court actio			ng? r custody modifications, and
		No Yes. Fill in the details	S.					
			N	lature of the case	Court or a	agency		Status of the case
		Case title			Court Nan	ne		Pending On appeal
		Case number			NumberSt	reet		Concluded
					City	State	Zip Code	
		Case title			Court Nan	ne		Pending On appeal
		Case number			NumberSt	reet		Concluded
					City	State	Zip Code	
		No. Go to line 11. Yes. Fill in the inform	nation below.	Describe the prope	erty		Date	Value of the property
		Creditor's Name		Explain what happ	ened			<u> </u>
		Number Street		Property was re	possessed.			
				Property was fo Property was ga				
		City	State Zip Code	Property was at	tached, seized,	or levied.		
				Describe the prope	erty		Date	Value of the property
		Creditor's Name						
		Number Street		Explain what happ	ened			
				Property was re Property was fo Property was ga	reclosed.			
		City	State Zip Code	Property was at		or levied.		

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Debt	tor 1	Sherrill First Name	R Middle Name	Pettiford Last Name	Case number (if known)		
11.			iled for bankruptcy, did an a payment because you o		ank or financial institution, s	et off any amou	nts from your
	<b>✓</b>	No Yes. Fill in the details.					
				Describe the action the	e creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street		Last 4 digits of account no	umber: XXXX-		
		City State	zip Code				
12.			ed for bankruptcy, was any dian, or another official?	of your property in the p	oossession of an assignee fo	or the benefit of	creditors, a court-
	<b>✓</b>	No Yes					
Part		List Certain Gifts a					
13.	Wi	No		ou give any gifts with a to	otal value of more than \$600	per person?	
		Yes. Fill in the details for Gifts with a total value per person		Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You Gav	ve the Gift				
		Number Street					
		City State Person's relationship to y	•				
		Person to Whom You Gav	ve the Gift				
		Number Street					
		City State Person's relationship to y	•				

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Deb	tor 1	Sherrill First Name	R Middle Name	Pettiford Last Name	Case number (if known)		
14.	Wit	hin 2 years before you filed	d for bankruptcy, did y	you give any gifts or contrib	utions with a total value of	more than \$600 to	o any charity?
	<b>✓</b>	No					
		Yes. Fill in the details for each	ch gift or contribution.				
		Gifts or contributions to that total more than \$600		Describe what you conti	ributed	Date you contributed	Value
		Charity's Name					
		Number Street					
		City State	Zip Code				
Part	6:	List Certain Losses					
	gam	No Yes. Fill in the details.  Describe the property you how the loss occurred	u lost and	Describe any insurance Include the amount that inspending insurance claims	surance has paid. List	Date of your loss	Value of property lost
				A/B: Property.			
		ut seeking bankruptcy or pure any attorneys, bankruptcy No Yes. Fill in the details.		credit counseling agencies for s	services required in your banl	kruptcy.	
				Description and value of transferred	f any property	Date payment or transfer was made	Amount of payment
		LAW FIRM		Filling Fee - 335.00		10/6/2016	\$335.00
		Person Who Was Paid 20 S. Clark Street					
		Number Street					
		28th Floor					
		Chicago Illinois	60603				
		City State	Zip Code				
		Email or website address None					
		Person Who Made the Payn	nent, if Not You				
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
		Email or website address					
		Person Who Made the Payr	nent, if Not You				

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Deb	tor 1		R		se number (if known)		
		First Name	Middle Name	Last Name			
17.	help	hin 1 year before you filed for byou deal with your creditors not include any payment or trans No Yes. Fill in the details.	or to make payments		lf pay or transfer a	any property to any	one who promised to
	ш	res. Fill in the details.					
				Description and value of any propertransferred	perty		Amount of payment
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
		City State	Zip Code				
		ude both outright transfers and to sfers that you have already listed No Yes. Fill in the details.		rity (such as the granting of a security			Do not include gifts and
				Description and value of any property transferred	Describe any payments re in exchange	ceived or debts pa	Date id transfer was made
		Person Who Received Transfe	er				
		Number Street					
		City State Person's relationship to you	Zip Code				
		Person Who Received Transfe	er				
		Number Street					
		City State Person's relationship to you	Zip Code				
19.		hin 10 years before you filed to ese are often called asset-protec		u transfer any property to a self-se	ttled trust or simil	ar device of which	you are a beneficiary?
		No Yes. Fill in the details.					
	Ц	103. I III III UIG UCIAIIS.		Description and value of the pro	perty transferred		Date transfer was made
		Name of trust					

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Person Who Was Paid  Number Street  City State Zip Code  XXXX-  Checking  Savings  Money market  Brokerage  Other  Checking	
20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for you moved, or transferred?  Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, broker cooperatives, associations, and other financial institutions.    No	
No   Yes. Fill in the details.    Last 4 digits of account number   Type of account or instrument   Dat account or instrument	
Person Who Was Paid  Number Street  Number Street  City State Zip Code  XXXX-  Checking  Savings  Money market  Brokerage  Other	Last balance count was before osed, sold, closing or oved, or transfer
City State Zip Code XXXX- Checking	ansferred
Person Who Was Paid  Savings  Number Street  Money market	
City State Zip Code  21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other deposite other valuables?	ory for securities, cash, or
✓ No  Yes. Fill in the details.  Who else had access to it?  Describe the contents	Do you still have it?
Name of Financial Institution  Number Street  Number Street  City State Zip Code	☐ No☐ Yes
22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy  No  Yes. Fill in the details.	y?
Who else had access to it?  Describe the contents	Do you still have it?
Name of Storage Facility  Name  Number Street  Number Street	☐ No ☐ Yes
City State Zip Code	

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Size   Manual Property You Hold or Control for Someone Else	1 Sherrill R	Pettiford	Case	e number (if known)	
Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.    Note	First Name Middle	Name Last Name			
No   No   No   No   No   No   No   No	Identify Property You Hold or	Control for Someone Else			
No   No   No   No   No   No   No   No					
Where is the property?    Owner's Name		t someone eise owns? include any	property you b	forrowed from, are storing for, or hold if	trust for
Where is the property?    Owner's Name	_				
Where is the property?					
Owner's Name Number Street  City State Zip Code  City State Zip Code  City State Zip Code  City State Zip Code  The purpose of Part 10, the following definitions apply:  • Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or tooks substances, wastes, or material in hazardous or tooks substances, wastes, or material in hazardous or fooks substances, wastes, or material in hazardous or fooks substances, wastes, or material in hazardous or deviations, facility or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.  • Attaination own, operate, or utilize it, including disposal sites.  • Attaination own, operate, or utilize it, including disposal sites.  • Attaination own, operate, or utilize it, including disposal sites.  • Attaination own, operate, or utilize it or or used to own, operate, or utilize it or or used to own, operate, or utilize it or or used to own, operate, or utilize it or or used to own, operate, or utilize it or or used to own, operate, or utilize it or or used to own, operate, or utilize it or utilize it or used to own, operate, or utilize it or used to own, operate, or utilize it or utilize it or used to own, operate, or utilize it or utilize it own on, operate, or utilize it or utilize it or utilize it own on, operate, or utilize it or utilize it own operate, or utilize it or utilize it own on, operate, or ut	Yes. Fill in the details.				
Number Street    City   State   Zip Code		Where is the property?		Describe the contents	Value
Number Street    City   State   Zip Code					
City State Zip Code  Store Details About Environmental Information  **The purpose of Part 10, the following definitions apply:  **Environmental law means any foderal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material, including statutes or regulations controlling the cleanup of these substances, wastes, or material, including statutes or governmental law, and the province wastes, or material, including disposal sites.  **Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it or used to own, operate, or utilize it including disposal sites.  **Hezardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substan	Owner's Name	Number Street			
City State Zip Code  Store Details About Environmental Information  **The purpose of Part 10, the following definitions apply:  **Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material means any focation, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.  **Hezardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxics substance, material pollutari, contaminant, or similar term.  **Private of the details of the	Number Street				
Sive Details About Environmental Information					
Sive Details About Environmental Information		City State	Zip Code		
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the purpose of Part 10, the following definitions apply:  ### Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.  ###################################	City State Zip C	ode			
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Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.  port all notices, releases, and proceedings that you know about, regardless of when they occurred.  Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?  No Yes. Fill in the details.  Governmental unit  Number Street  Number Street  City State Zip Code  Have you notified any governmental unit of any release of hazardous material?  No Yes. Fill in the details.  Governmental unit  Environmental law, if you know it  Date of notice  Part of notice  Brivinonmental law, if you know it  Date of notice  Fill in the details.  Governmental unit  Name of site  Governmental unit  Name of site  Governmental unit  Number Street  Number Street  Number Street  Number Street  Number Street  Zip Code	Site means any location, facility, or proper	ty as defined under any environmental	law, whether you	now own, operate, or utilize it	
toxic substance, hazardous material, pollutant, contaminant, or similar term.  cont all notices, releases, and proceedings that you know about, regardless of when they occurred.  Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?  No Yes. Fill in the details.  Governmental unit  Number Street  City State Zip Code  City State Zip Code  Have you notified any governmental unit of any release of hazardous material?  No Yes. Fill in the details.  Governmental unit  Finvironmental law, if you know it  Oate of notice  City State Zip Code  Governmental unit  Finvironmental law, if you know it  Oate of notice  Name of site  Name of site  Name of site  Number Street  Number Street  City State Zip Code	or used to own, operate, or utilize it, inclu	iding disposal sites.			
Has any governmental unit notified you that you may be flable or potentially liable under or in violation of an environmental law?    No	Hazardous material means anything an e	nvironmental law defines as a hazardou	us waste, hazard	ous substance,	
Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?  No Yes. Fill in the details.  Governmental unit  Name of site  City  State  Zip Code  City  State  Zip Code  City  State  Date of notice  City  State  Zip Code  Have you notified any governmental unit of any release of hazardous material?  No Yes. Fill in the details.  Governmental unit  Environmental law, if you know it  Date of notice  City  State  Zip Code  Date of notice  City  State  Zip Code	toxic substance, hazardous material, poll	utant, contaminant, or similar term.			
Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?  No Yes. Fill in the details.  Governmental unit  Name of site  City  State  Zip Code  City  State  Zip Code  City  State  Date of notice  City  State  Zip Code  Have you notified any governmental unit of any release of hazardous material?  No Yes. Fill in the details.  Governmental unit  Environmental law, if you know it  Date of notice  City  State  Zip Code  Date of notice  City  State  Zip Code	t all notices, releases, and proceedings tha	it you know about, regardless of when	they occurred.		
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Yes. Fill in the details.   Governmental unit   Environmental law, if you know it   Date of notice	-		<b>,</b>		
Name of site   Governmental unit   Environmental law, if you know it   Date of notice					
Name of site    Number Street	Yes. Fill in the details.				
Name of site    Number Street		Governmental unit		Environmental law, if you know it	
Number Street  City State Zip Code  City State Zip Code  Have you notified any governmental unit of any release of hazardous material?  No Yes. Fill in the details.  Governmental unit  Finvironmental law, if you know it  Number Street  Number Street  City State Zip Code					nonce
Number Street  City State Zip Code  City State Zip Code  Have you notified any governmental unit of any release of hazardous material?  No Yes. Fill in the details.  Governmental unit  Finvironmental law, if you know it  Name of site  Number Street  Number Street  City State Zip Code	Name of site	Governmental unit			
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Have you notified any governmental unit of any release of hazardous material?  No Yes. Fill in the details.  Governmental unit  Environmental law, if you know it  Name of site  Governmental unit  Number Street  City State Zip Code					
Have you notified any governmental unit of any release of hazardous material?  No Yes. Fill in the details.  Governmental unit  Environmental law, if you know it  Name of site  Number Street  Number Street  City State Zip Code		City State	Zip Code		
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Yes. Fill in the details.  Governmental unit  Environmental law, if you know it  Ontice  Name of site  Number Street  City State Zip Code	ave you notified any governmental un	it of any release of hazardous mate	rial?		
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Name of site   Governmental unit   Environmental law, if you know it   Date of notice					
Name of site  Governmental unit  Number Street  City State Zip Code	103. I ili ili ule detallo.	Governmental unit		Environmental law if you know it	Date of
Name of site  Governmental unit  Number Street  Number Street  City State Zip Code		Governmental unit		Environmental law, if you know it	
Number Street    Number Street   City   State   Zip Code					<del>.</del>
City State Zip Code	Name of site	Governmental unit			
City State Zip Code					
	Number Street	Number Street			
City State Zin Code					
		City State	Zip Code		

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Deb	tor 1	Sherrill		R	Pettiford	Case	number (if known)	
		First Name		Middle Name	Last Name			
26.	Hav	e vou heen a narty	in any judic	rial or administr	ative proceeding under	any environmenta	I law? Include settlements and order	·s
20.		e you been a party	in any judic	iai oi adiiiiiisti	ative proceeding under	any environment	il law : illelade settlements and order	<b>J.</b>
	<b>✓</b>	No						
		Yes. Fill in the deta	ils.					
					Court or agency		Nature of the case	Status of the
								case
		Case title						Dan dia a
		-			Court Name			Pending
					Court Name			On appeal
		Case number			Number Street			
								Concluded
					City State	Zip Code		
		1						4
Part	11:	Give Details A	bout Your	Business or	Connections to An	y Business		
<b>.</b> -	1800					h	Handan and an action to the last	- 0
27.	vviti	nin 4 years before	you filed for	bankruptcy, did	i you own a business or	nave any of the fo	ollowing connections to any business	5?
		A sole propriet	or or self-emp	oloyed in a trade,	profession, or other activit	y, either full-time or	part-time	
				-	) or limited liability partners		•	
		A partner in a		,, ( <u></u> -	,,			
				ging executive of	a corporation			
						<b></b>		
		An owner or at	least 5% of t	ne voting or equit	y securities of a corporation	n		
	<b>✓</b>	No. None of the abo	ove applies. G	o to Part 12.				
	П	Yes. Check all that	apply above a	and fill in the detai	ls below for each business			
	_				Describe the natu		s Employer Identification r	number Do not
							include Social Security n	
							EIN:	
		Business Name			_		LIIV.	
		Number Street			— Nama at a a a a a a a		Dates business existed	
					Name of account	ant or bookkeepe		
		City	State	Zip Code			From To	<u></u>
					Deceribe the net	ura of the business	- Fundavan Idantification n	www.bar.Da.nat
					Describe the natu	ire of the busines	s Employer Identification n include Social Security no	
								umber of frint.
		Business Name			_		EIN:	
		Number Street			_		Dates business existed	
					Name of account	ant or bookkeepe	r	
		City	State	Zip Code			From To	
		Only	Ciale	Zip Code				
					Describe the natu	re of the busines		
							include Social Security no	umber or ITIN.
							EIN:	
		Business Name						
		-			_		Dates business existed	
		Number Street			Name of account	ant or bookkeene		
						and or bookkeepe		
		City	State	Zip Code			From To	

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Debtor			R	Pettiford	Case number (if known)	
	First Name		Middle Name	Last Name		
	Vithin 2 years   reditors, or ot	•	oankruptcy, did y	ou give a financial statemer	nt to anyone about your business? Include all financial institutions,	
	✓ No Yes. Fill in th	ne details below.				
				Date issued		
	-					
	Name			MM/DD/YYYY		
	Number	Street		_		
	City	State	Zip Code	<del>_</del>		
Part 12	2: Sign Bel	la				
			p to \$250,000, or		y, or obtaining money or property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.	
		Signature of Debtor 1	•	<del></del> ,	Signature of Debtor 2	
		· ·			Date	
		Date 10/6/2016				
Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?						
	l No	. 0			,	
<u> </u>	4					
	Yes					
Die	d you pay or a	gree to pay someon	e who is not an a	ttorney to help you fill out b	ankruptcy forms?	
<b>✓</b>	No					
	Yes. Name of	f person			Attach the Bankruptcy Petition Preparer's Notice,	
					Declaration and Signature (Official Form 110)	

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Fill in this information to identify your case:				
Debtor 1	Sherrill	R	Pettiford	
İ	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	Northern	District of Illinois	_
Case number (If known)			(State)	_

### Check if this is an amended filing

#### Official Form 108

#### Statement of Intention for Individuals Filing Under Chapter 7

12/15

- If you are an individual filing under chapter 7, you must fill out this form if:
- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1.	For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.						
	Identify the cred	itor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?			
	Creditor's name: City of Chic Description of property securing debt:	cago Heights  Code Violation	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	✓ No. Yes.			
	Creditor's name: Chase Mor Description of property securing debt: \$70,000.00	tgage 2605 S Indiana Ave, Chicago, IL 60690   Value:	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	✓ No. Yes.			
	Creditor's name: DK Condo: Association Description of property securing debt: 60616	The Stratford at South Commons Condominium  Assessments for 2605 S Indiana Ave, Chicago, IL	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	No. Yes.			
	Creditor's name: Cook Coun Description of property securing debt: \$68,083.00	ty Treasurer 215 W 16th Pl, Chicago Heights, IL 60411   Value:	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	No. Yes.			

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Debtor	Sherrill	R	Pettiford	Case number (if	
1	First Name	Middle Name	Last Name	known)	_
				Part 2:	
	r Unexpired Personal Pr				
				tracts and Unexpired Leases (Official Form 106G), fill in the I in effect; the lease period has not yet ended. You may assur	ne
	pired personal property lease i				
Doo	cribe your unexpired personal	nronorty logge		Will the lease be assumed?	
Des	cribe your unexpired personal	property leases		will the lease be assumed:	
Less	sor's name:			☐ No	
				Yes	
	cription of leased				
prop	erty.				
Less	sor's name:			No	
				Yes	
	cription of leased				
prop	erty:				
ا مود	sor's name:			☐ No	
	on a name.			Yes	
Des	cription of leased				
prop	erty:				
Loo	sor's name:			☐ No	
Less	ou s name.			Yes	
Des	cription of leased				
prop	erty:				
				☐ No	
Less	sor's name:			Yes	
Des	cription of leased				
prop	erty:				
				☐ No	
Less	sor's name:			Yes	
Des	cription of leased				
prop	erty:				
				□ No	
Less	sor's name:			Yes	
Des	cription of leased				
prop	erty:				
Dart 2	Sign Below				
	-				
	r penalty of perjury, I declare tl erty that is subject to an unexp		ntention about any propert	ty of my estate that secures a debt and any personal	
1-1-019	,	<del>-</del> -			
	s/ Sherrill Pettiford		*		
Si	gnature of Debtor 1		Signature	e of Debtor 1	
Da	ate 10/6/2016		Date		
	MM/DD/YYYY		M	M/DD/YYYY	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

## Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

## Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

## Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B 203 (12/94)

In

#### **UNITED STATES BANKRUPTCY COURT**

		Northern District of	illinois	
e	Sherrill R Pettiford	And a description of the section of	Case No.	
	Debtor			(If known)
			Chapter	Chapter 7
	SISCLOSURE OF	COMPENSATION O	F ATTORNEY F	OR DEBTOR
compe	ensation paid to me within one	ed. Bankr. P. 2016(b), I certify that year before the filing of the petition of the debtor(s) in contemplation o	n in bankruptey, or agreed to	be paid to me, for services
For le	gal services, I have agreed to ac	cept		\$1,338.00
Prior t	to the filing of this statement I i	nave received		\$0.00
Baland	ce Due			\$1,338.00
2. The so	ource of the compensation paid	f to me was:	- 0 D	
	<b>✓</b> Debtor	Other (specify)	MA	- Character - Char
3. The so	ource of the compensation paid	I to me is:	V	
	<b>✓</b> Debtor	Other (specify)		
4. <b>1</b> m	nave not agreed to share the ab embers and associates of my la	ove-disclosed compensation with a aw firm.	any other person unless they	/ are
m.	nave agreed to share the above- embers or associates of my law se people sharing in the compe	disclosed compensation with a oth firm. A copy of the agreement, tog esation, is attached.	ner person or persons who a gether with a list of the name	re not s of
5. In retu a.	m for the above-disclosed fee, Analysis of the debtor's finan bankruptcy;	I have agreed to render legal service cial situation, and rendering advice	e for all aspects of the bankr to the debtor in determining	ruptcy case, including: g whether to file a petition in
b.	Preparation and filing of any p	petition, schedules, statements of a	affairs and plan which may be	e required;
C.	Representation of the debtor	at the meeting of creditors and con	firmation hearing, and any a	djourned hearings thereof;
6. By agr	eement with the debtor(s), the	above-disclosed fee does not inclu	de the following services:	
		CERTIFICATION		
I certify tebtor(s) in	that the foregoing is a complete this bankruptcy proceedings.	e statement of any agreement or arr	rangement for payment to m	e for representation of the
	10/6/2016		/s/ Elizabeth Placek	
	Date		Signature of Attorney	
			Semrad Law Firm	
	•		Name of law firm	

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10/6/2016 title

#### CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC, to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I agree to pay The Semrad Law Firm, LLC \$1338.00 in attorney fees plus costs in the amount of \$412.00 to represent my interests in the preparation and filing of my Chapter 7 Petition and Schedules; preparation and attendance of the Section 341 Meeting of Creditors; review of any redemption agreements; review of any reaffirmation agreements; and case administration and monitoring. I further understand and agree that additional professional legal services will result in fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representing Client in Adversary Proceeding. \$300.00/hr.

Adding additional bills \$50.00

Motion to Reopen and Avoid Lien \$1000.00

Motion to Reopen \$350.00 + court costs

I understand that these fees must be paid before such work will be completed. I acknowledge and agree that as the above additional fees constitute post-petition services, they are not dischargeable in my Chapter 7 case.

I also understand that, unless otherwise agreed, my Chapter 7 bankruptcy case will not be filed until I pay the attorney fees in full. As The Semrad Law Firm, LLC will begin to work on my file immediately after entering into this contract; I understand that any and all funds paid are not refundable.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay the balance of any unpaid fees to The Semrad Law Firm, LLC. Any fees owing to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy may be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay unpaid fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw representation in the event that I do not sign a second retainer after filing my case promising to pay said fees or in the event that I do not pay said fees.

I understand that any funds that I am tendering to The Semrad Law Firm, LLC, as part of this advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm. I further understand that it is ordinarily my option to deposit funds with an attorney that shall remain my property as security for future services. However, The Semrad Law Firm, LLC, does not represent clients under such a security retainer because the preparation of a bankruptcy case requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while others may be only ministerial in nature. I further understand that the benefit that I am receiving under this fee arrangement is the commitment of The Semrad Law Firm, LLC, to perform any and all work reasonably necessary to file my case absent any extraordinary circumstances.

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title

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As The Semrad Law Firm, LLC, has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC. This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.\*

I also understand that, if I am refiling a case with The Semrad Law Firm, LLC, and an audit of the previous case(s) indicate that remaining attorney fees are owed; any initial funds I pay to refile will first be applied to the balance owed on the previous case(s). If client breaches this agreement, client will be responsible for all costs associated with enforcing the terms of this contract including but not limited to court costs and attorney fees.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC, or an agent thereof.

Date: 1/0/6/2016

Sherrill R Pettiford

abith Plaul Attorney

\*DISCLAIMER

The creditors listed in your bankruptcy petition will receive notice of your bankruptcy filing from the Clerk of the United States Bankruptcy Court. Please be advised that it will be several days before these creditors receive the notice. Therefore, if you are concerned about a particular creditor taking immediate action against you, contact this creditor directly and provide the creditor with a copy of your Notice of Bankruptcy Filing. This is especially important if you are at risk of having you vehicle repossessed, real estate foreclosed, or wages garnished.

Sherrill R Pettiford

Initial: <u>XX</u>

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B 203 (12/94)

#### **UNITED STATES BANKRUPTCY COURT**

		Northern District o	f Illinois	
n re	Sherrill R Pettiford		Case No.	
_	Debtor			(If known)
			Chapter	Chapter 7
	DISCLOSURE OF CO	MPENSATION C	F ATTORNEY FO	OR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. that compensation paid to me within one services rendered or to be rendered on is as follows:	e year before the filing of the	ne petition in bankruptcy, or a	agreed to be paid to me, for
	For legal services, I have agreed to acc	ept		\$1,338.0
	Prior to the filing of this statement I have	re received		\$0.0
	Balance Due			\$1,338.0
2.	The source of the compensation paid to	me was:		
	<b>D</b> ebtor	Other (specify)		
3.	The source of the compensation paid to	me is:		
	<b>D</b> ebtor	Other (specify)		
4.	I have not agreed to share the above members and associates of my law	re-disclosed compensation or firm.	with any other person unless	s they are
	I have agreed to share the above-dimembers or associates of my law f the people sharing in the compensa	irm. A copy of the agreeme		
5.	In return for the above-disclosed fee, I had a. Analysis of the debtor's financial bankruptcy;	_		
	b. Preparation and filing of any peti	tion, schedules, statement	s of affairs and plan which m	nay be required;
	c. Representation of the debtor at the	he meeting of creditors and	I confirmation hearing, and a	ny adjourned hearings thereof;
6.	By agreement with the debtor(s), the ab	ove-disclosed fee does not	include the following service	es:
		CERTIFICATIO	N	
	I certify that the foregoing is a complete s ne debtor(s) in this bankruptcy proceeding		nt or arrangement for payme	nt to me for representation
	10/6/2016		/s/ Elizabeth Placek	
	Date		Signature of Attorney	
			Semrad Law Firm	
			Name of law firm	

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#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Pettiford, Sherrill R	Case No.					
	Debtor(s)		Case NO.				
		Chapter.	Chapter7				
	VERIFICATION OF CREDITOR MATRIX						
	The above named Debtors hereby verify that	at the attached list of creditors is true and c	correct to the best of their l	knowledge.			
Date:	10/6/2016	/s/ Pettiford, Sherrill R					
_		Pettiford, Sherrill R					
		Signature of Debtor					

MAB&T-SCUSA CREDIT BUREAU REPO POB 961245 FORT WORTH , TX 76181

MIDLAND FUNDING 2365 Northside Drive San Diego , CA 92108

MIDLAND FUNDING 2365 Northside Drive San Diego , CA 92108

NORTH AMERCN POB 182221 CHATTANOOGA , TN 37422

cb/carson PO BOX 15521 Wilmington , DE 19805

MERCHANTS & MEDCAL 6324 TAYLOR DR FLINT , MI 48507

GOLDKEY CRED P O BOX 15670 BROOKSVILLE , FL 34604

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE , FL 32256

AT&t Po Box 5014 Carol Stream , IL 60197

City of Chicago Heights 39773 Treasury Center Chicago, IL 60694

Northwestern Medical Group 26609 Network place Chicago , IL 60673

Florida Hospital Orlando 601 E Rollins St Case 16-31923 Doc 1 Filed 10/06/16 Entered 10/06/16 12:05:17 Desc Main Document Page 64 of 71

Orlando , FL 32803

Chase Mortgage PO Box 24696 Columbus , OH 43224

Select Portfolio Serv PO Box 6525 Salt Lake Clty , UT 84165

DK Condo: The Stratford at South Commons Condominium Association 33 W Monroe St FI 19 Chicago , IL 60603

ARNSTEIN & LEHR 120 S Riverside Chicago , IL 60606

Cook County Treasurer 118 N. Clark St. Room 112 Property Tax Chicago, IL 60602

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Debtor 1 Sherrill First Name	R Middle Name	Pettiford Last Name	Case number (if known)	
VIII. (1)	uestions for Reporting Pur			
16. What kind of debts do you have?	No. Go to line 16  Yes. Go to line 16  Are your debts prin  money for a busines  No. Go to line 16  Yes. Go to line 16	Adual primarily for a per 6b. 7. narily business debts? s or investment or thro 6c. 7.	e? Consumer debts are defices on al, family, or household of Business debts are debts to bugh the operation of the bugh to consumer debts or business.	hat you incurred to obtain usiness or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	No.	napter 7. Do you estimate		ty is excluded and administrative reditors?
18. How many creditors do you estimate that you owe?	☑ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5 5,001-1 10,001-	T	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	□ \$10,000 □ \$50,000	001-\$10 million [ 0,001-\$50 million [ 0,001-\$100 million [ 00,001-\$500 million [	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?  Part 7: Sign Below	□ \$0-\$50,000 □ \$50,001-\$100,000 ☑ \$100,001-\$500,000 □ \$500,001-\$1 million	\$10,000 \$50,000	001-\$10 million 0,001-\$50 million 0,001-\$100 million 00,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
	correct.  If I have chosen to file under of title 11, United States Counder Chapter 7.  If no attorney represents mout this document, I have out this document, I have out the interest relief in accordance I understand making a false connection with a bandrupt both. 18 U.S.C. §§ 152 13  **  /s/ Shemill Pettiford Signature of Debtor 1	er Chapter 7, I am awar ode. I understand the re e and I did not pay or a btained and read the no e with the chapter of ti e statement, concealing toy case can result in find 1,1519, and 3571	e that I may proceed, if eligical elief available under each of the elief available under each of elief availabl	specified in this petition. ney or property by fraud in risonment for up to 20 years, or
eleksikaan jokala kalantain kalantain kalantain kalantain kalantain kalantain kalantain kalantain kalantain ka Kalantain jokalantain kalantain kalantain kalantain kalantain kalantain kalantain kalantain kalantain kalantai	Executed on 10/6/2	016 /DD/YYYY	Executed on	MM / DD / YYYY

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Fill in this infor	mation to identify you	If Case:	21	
Debtor 1	Sherrill	8	Pettiford	
Debtor 2	First Name	Middle Name	Last Name	
(Spouse, if filing)	First Name	Middle Name	Last Name	WWW.mana.au
United States B	ankruptcy Court for th	ie: Northern	District of Illinois	
Case number			(State)	
(If known)				MANAGEMENT AND
Official	Form 106D	)ec		Check if this is an amended filing
Declarati	on About a	n Individual Debto	r's Schedule	S 12/15
If two married p	eople are filing toge	ther, both are equally respons	sible for supplying corre	ct information.
Parkit Sign Did you pa	Below	i. meone who is NOT an attorney	r to help you fill out ban	o \$250,000, or imprisonment for up to 20 years, or both. 18  okruptcy forms?  Petition Preparer's Notice, Declaration, and
Under pen that they a  /s/ Sherril	Pettiford	are that I have read the summ	×	
Date 10/6/	2016 75/1111		Date	M/DD/YYYY

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Debtor 1		Р		Pettiford	Case number (//known)
	First Name	M	iddle Name	Last Name	
28. Wit	thin 2 years before	you filed for ha	ankruntov did	vou nive a financial ctator	nent to anyone about your business? Include all financial institutions,
cre	editors, or other pa	rties.		lon Ano a mantem state	nett to anyone about your business? Include all imancial institutions,
	No				
Section 2	Yes. Fill in the de	tails below.			
e de la constante de la consta	•			Date issued	
	Name			MM/DD/YYYY	
	Number Street	<del></del>		<del></del>	
	City	State	Zip Code	<del></del>	
Pairt 12i	Sign Below				
HOG	nkruptcy case can	erstand that ma	iking a taise st	atement, concealing proc	ments, and I declare under penalty of perjury that the answers are perty, or obtaining money or property by fraud in connection with o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	Signat	ure of Debtor 1			Signature of Debtor 2
	Date 1	10/6/2016			Date
Did y	ou attach addition	al pages to Yo	yr Statement o	f Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?
Environme	No		3		, ,,
Social 1	Yes				
Did y	ou pay or agree to	pay someone v	vho is not an a	ttorney to help you fill out	bankruptcy forms?
V 1	No				
Torrest 1	Yes. Name of persor	1			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

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Debtor	Sherrill	R	Pettiford	Case number (if	
1	First Name	Middle Name	Last Name	known)	
Part 2:	List Your Unex	pired Personal Property Lea	ses		
intorma	ation below. Do not	al property lease that you listed list real estate leases. Unexpire sonal property lease if the truste	d leases are leases that a	Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).	
De	scribe your unexpir	ed personal property leases		Will the lease be assumed?	
Les	ssor's name:			No was Yes	
	scription of leased operty:			less 165	
Les	ssor's name:			No	
	scription of leased sperty:			Everyadi	***************************************
Les	ssor's name;			No Yes	
	scription of leased perty:			E-manual -	***************************************
Les	ssor's name:			No Yes	
	scription of leased perty:			* Normanii	1
Les	sor's name:			No Yes	
	scription of leased perty:			saabou/	
Les	sor's name:			☐ No ☐ Yes	4
	scription of leased perty:			Vacconti	1 1 1
Les	sor's name:			No Yes	
	cription of leased perty:			Annuarit.	1 1 1 1 1 1
airt 3:	Sign Below				
Unde prope	er penalty of perjury erty that is subject	I declare that I have indicated to an unexpired lease.	my intention about any p	roperty of my estate that secures a debt and any personal	•
	/s/ Sherrill Pettiford	Alkin & Netty	Sign:	ature of Debtor 1	
	ate 10/6/2018 MM/D8/YYYY		Date		

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#### **UNITED STATES BANKRUPTCY COURT**

Northern District of Illinois

In re:	Pettiford, Sherrill R	o	
-	Debtor(s)	Case No	19-14-1
		Chapter.	Chapter7
	VERIFI	CATION OF CREDITOR MAT	TRIX
Th knowledge	e above named Debtors hereby verif	y that the attached list of creditors is to	rue and correct to the best of their
Date:	10/6/2016	/s/ Pettiford, She	
		Pettiford, Sherrill Signature of Del	

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Debtor	1 Sherrill	R	Pettiford	Case number (#	knownt	
	First Name	Middle Name	Last Name	Column A Debtor 1	Column B Debtor 2 or	
Do	mployment compensation of enter the amount if you er the Social Security Act. I	contend that the amount re	ceived was a benefit	\$0.00	non-filing spous	se
For			\$0.00 \$0.00			
9.Pen ben	sion or retirement incom efit under the Social Securit	e. Do not include any amou y Act.	nt received that was a	\$0.00		····
10. <b>in</b> c amo payi inter	ome from all other source ount. Do not include any be ments received as a victim of	ses not listed above. Specify mefits received under the So of a war crime, a crime again; sm. If necessary, list other so	cial Security Act or			
Tota	I amounts from separate p	ages, if any.		+\$0.00	+	
11. Ca	iculate your total curren	t monthly income. Add line	s 2 through 10 for	\$1,807.12	+	<b>=</b> \$1,807.12
	lumn. Then add the total fo	or Column A to the total for (	Column B.			
Pant 21	Determine Whether	the Means Test Applies	s to You			Total current monthly income
		hly income for the year. Fo			organis windows in a property of the state o	
		onthly income from line 11.	niow trese steps.	Сод	oy line 11 here →	\$1,807.12
	Multiply by 12 (the number	er of months in a year).				X 12
12b.	The result is your annual is	ncome for this part of the for	m.		12	b. \$21,685.44
13 Calc	ulate the median family	ncome that applies to you	. Follow these steps:			Lucia
Fill in	the state in which you live		Illinois			
	the number of people in y		1			
hous	the median family income ehold.				1	3. \$49,741.00
mstre	nd a list of applicable media actions for this form. This li a do the lines compare?	in income amounts, go onlir st may also be available at th	e using the link specified e bankruptcy clerk's office	in the separate e.		<u> </u>
14a.	Line 12b is less than of Go to Part 3.	or equal to line 13. On the to	of page 1, check box 1	. There is no presumption o	of abuse.	
14b.	Line 12b is more than Go to Part 3 and fill ou	line 13. On the top of page it Form 122A-2.	1, check box 2, The pres	umption of abuse is determ	nined by Form 122A-2.	
Pari 3:	Sign Below					
By s	igning here, I declare unde	penalty of perjury that the ir	nformation on this statem	ent and in any attachments	is true and correct.	THE CONTRACT OF THE CONTRACT O
	/s/ Sherrill Pettiford	Skeen R Det	Cyol ×	gnature of Debtor 2		14 Mily Myljona
E	Date 10/6/2016 MM/DD/YYYY			tle 10/6/2016 MM/DD/YYYY		
lf :	ou checked line 14a, do N ou checked line 14b, fill o	OT fill out or file Form 122A ut Form 122A-2 and file it wi	-2. th this form.			